

**NATURE'S LAW OF
BIRTH CONTROL**

By the Same Author

SEX AT CHOICE (7th Impression)

(For Press notices and opinions see advertisement at end)

NATURE'S LAW OF BIRTH CONTROL

By
LADY MONTEITH ERSKINE

WITH AN INTRODUCTION BY
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INTRODUCTION

BY SIR JAMES MONTEITH ERSKINE

IN contra-distinction to present day methods of family limitation, the reader will find that the message contained in this book aims at raising married life to a higher plane, since it makes for the use, and not the abuse, of the matrimonial bond.

Modern Birth Control methods are admittedly unsatisfactory in their operation, and it is doubtful whether the results achieved compensate for their disadvantages, physically and otherwise.

It is, however, becoming increasingly accepted among leaders of public opinion, not only in Parliament and the Press, but even in the Churches, that properly authenticated information should be made available alike to rich and poor, and it seems to me therefore all the more satisfactory that a solution to this vexed question should have been won from Nature, which, while offering the race, and especially women, relief from the menace of unrestricted population, is unattended by any handicap either to physical or moral well being.

The patience and assiduity which my wife has devoted to the unravelling of this vital problem will, I not only hope but believe, be rewarded by the same fruitful results in helping womankind which have attended her work in the field of sex determination.

AUTHOR'S PREFACE

IT was whilst my investigations were proceeding and my evidence was being accumulated on the question of Sex-Determination that I almost unwittingly stumbled on a further truth—Nature's solution of one of the most baffling problems of the day.

This book that I now venture to lay before the Public is a corollary of my work "Sex at Choice," and in it I deal with a subject of equal, if not to many of greater, importance, namely, how to meet the urgent, though sometimes fictitious, demand created by present day necessities for the limitation of families, without in any way contravening the laws of God or man.

Personally I have condemned rather than commended those mothers who sacrifice their natural responsibilities of maternity on the altars of materialism and fear. I am one of those people—old-fashioned, perhaps—who still believe that where the conditions make it at all possible, children not only cement the bonds of matrimony, but bring joy and love to the home by the common interests that they create.

In spite of the contempt which nowadays is poured

on such adages as "The Lord will provide," in all my experience of slum life, I have yet to find that Mrs. Smith, with her seven healthy and carefully-kept children on £3 weekly, is any worse off than Mrs. Jones, who, on the same income, artificially restricts her family to an only child. The latter, being the first attempt, is in all probability puny, pampered and badly brought up, whilst a certain lack of occupation and interest proves too often a temptation to the husband or wife to seek distraction of a more costly and less desirable nature outside the home.

It is, I believe, amongst our large families that there has been born and bred the spirit of unselfishness and self-sacrifice which we take pride as a nation in believing to be a distinctive trait of the Anglo-Saxon character.

But whatever may be our views or personal inclinations, the fact must be faced that the demands of economic circumstances and the stress of modern conditions have left a gap which can only be filled by limitation. Birth Control has come to stay—But in what form?

To those who have witnessed the flood of contraception that has submerged the population of France, sterilising the natural fecundity of her women-folk and emptying her fertile fields, the menace to our natural well-being and vitality, now that we are ourselves confronted with the full force of its inroads, is dangerously apparent.

Such a tide is hard to stem, and perhaps it is not advisable to attempt to do so ; but one can direct it into proper channels, one can prevent it from overflowing its bounds to the detriment of a helpless population—and that hope alone has animated me in writing this book.

Nature never intended women to be semi-sterilised by the use of deleterious drugs—she is not so impotent as to be unable to come to the rescue of humanity in times of stress. We wives were not meant to choose between the Scylla of over-production and the Charybdis of artificial contraception. Nature knows the middle course—the Way along which the waters are smooth, and free from lurking perils. Let *her* take the helm and pilot us to safety.

CICELY ERSKINE.

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I

NATURE IGNORED

“The plea of ignorance will never take away our responsibilities.”—RUSKIN.

WOMAN is called to strive along the way of Progress—that is a token of her greatness. it is also a part of her nature that she should keep the law, for if she breaks it, she must inevitably break herself. But if, in the past, she has not broken herself and humanity by the betrayal of many of Nature's laws, it is thanks rather to her own adherence to the innate feeling of truth within her, than to a civilisation based for centuries on the subservience of woman to the brute superiority of man !

Emerging, slowly but surely, step by step, from an oppression dating from the limbo of ages past, unravelling her own personality from that of her mate—chivalrous as he may or may not have been—throughout those thousands of years, woman has been gradually finding herself, disentangling her mental structure from that of mere feminine sexuality as the alpha and omega of her whole moral standard and—invincible in her belated and new-found freedom—is spreading

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her influence abroad, continually more powerful in its potentiality for good—for Construction rather than Destruction !

But it was barely a generation ago that women awoke to the realities of life and the position allotted to them—one of an almost intolerable surrender to the hypocrisy of a society in which there were two separate moral standards ; the first based on liberty—or licence ; the other on a slavery to a one-sided morality which divided all womankind into two distinct classes : the “ good ” women, and those of “ easy virtue,” with a total disregard for any qualities of mind or soul that they might possess independently of their sex ! So drastic were these rules, so crudely restricted the chart governing women’s lives, that it required the whole weight of their superior numbers, leavened by the vision of certain pioneers of the Women’s Movement towards the end of the last century, to effect that *permeation* of realisation of the sexual and economic inferiority of their position, necessary for the subsequent world-wide upheaval known as the “ Emancipation of Women.”

And it is far more recently still that freedom of thought and speech and frank discussion of matters appertaining to sex have been allowed to come into the open as was so urgently required, and that woman has been permitted to examine the why and wherefore of her existence and the reason of her

femaleness in all the perfection of its complex organisation.

So vital are these questions, that they need treating with the reverence we bestow on the most sacred matters of life ; but to ensure that reverence, we must be able to work upon them with a clear intellect, a clean mind and an intelligent understanding of Nature's scheme and aims.

Secrecy co-habits with darkness ; around mystery floats introspection and unwholesome speculation. The youth of yesterday blushed at his own private thoughts, if they happened, as they often did, to dwell on matters relating to nature—matters entirely sweet and beautiful if explained simply, and decently understood !

Perhaps the battle fought by and for women has scarcely been won long enough for us to perceive the full fruits of the victory. There are in our midst still many millions of women suffering from the faults of a past age—faults that may still, in certain groups of society, persist to the detriment of many young lives. But of one thing let us make certain, that in the near future there be not hurled at us, as parents and teachers of to-morrow, the reproach too often heard on all sides : “ Why was I not told these things ? Why was I not warned ? ”

It is a curious fact that, in common with the puritan and Quaker element of the United States, we were the last people in the world to realise or accept any

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responsibility with regard to enlightening youth on the subject which is of paramount importance to the lives of each young person. Boys were left to pick up for themselves, at school, or from each other at play, or again through the avenues of vice, any information that might throw some light on that obscure and awful subject, sex.

But to most girls, even this possibility was denied. They were deliberately wrapped round in the swaddling clothes of dense ignorance, from which only the more enterprising managed to emerge, stealthily, in deadly secret, in order to seize on any forbidden fruit lying within their reach. Too well they knew that all straightforward knowledge and discussion of such matters would be sternly repressed, and even their bare mention disapproved of and denied.

A little friend of my childhood, overhearing her parents discussing the confinement of a friend, asked, "What does 'confinement' mean?"

"Never mind! run away!" replied the father sternly.

The child ran straight to the stables where the stable-boy was grooming the horse.

"Tom, what does 'confinement' mean?" asked the child.

"Well, miss," returned the youth cautiously, "I s'pect it means being confined in a stable like this here horse, or in a lunatic asylum like my poor aunt,

or in bed with a new baby, like Mother, just now, at home ! ”

All curiosity vindicated, and immediately interested in the name and attributes of the latest arrival to Tom's home, that child had reason to bless the stable-boy who, with the tact born of innate delicacy, had supplied a want that a misguided parent had denied.

But other happenings of this nature may have the most unfortunate consequences.

A schoolboy who had been severely chaffed by others on his “innocence,” was persuaded to pay over his term's pocket-money to a big bully in his class, who undertook in return to “tell him everything.” What the child was told changed him, in due course, from a healthy-minded, happy boy into a morbid and vicious youth, beset with troubles he need never have known had he been properly forewarned against them.

A tall, fine girl who came to seek my advice had been obliged to abandon her job in a good business house, as at certain times she was crippled with acute pains, due to excessive rowing whilst at college, when not “up to the mark.” She had no funds to pay for any treatment, and she dreaded the hospital. She broke down in her distress and used words I have never forgotten : “I wish Mother had warned me to be careful of my health in those days. I was so strong, and I see now how foolish I have been ! ”

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A dainty young girl whom I knew was brought up by an aunt—tenderly and stupidly—in complete ignorance of the world and its ways. Trusting implicitly in an elderly married man, who, though she never guessed it, was enamoured of her, she was taken advantage of by him under inconceivable circumstances and with dire results.

Too terrified to tell her aunt, she realised her position only after weeks of surprised horror at certain of her symptoms. In despair, she swallowed a draught of a strong disinfectant before her aunt was made aware of the trouble. The girl recovered, but a six-month, still-born boy, left the poor little mother a wreck, both physically and mentally.

Quite recently she said to me in her broken, nervous way, "I knew nothing—absolutely nothing, or such horrors would never have happened to me! I ignored everything about love or passion. I had no idea where babies came from, nor anything about such matters, and as for my general health I did such foolish things that I wonder that I am alive to tell the tale."

Not long ago I met a lady in Scotland who was partially paralysed and on crutches. Young, pretty and happily married, she craved for the children denied her. She told me she had bathed during cold weather in the river, when not in a fit state, and a slight stroke had been the immediate result. It was in the first year of her marriage, she said, and wistfully

she added, " If only my mother had explained things to me, I could have avoided all this illness and sorrow."

Recently a Scotch woman, aged forty-five, and married seven years, told me that her doctor, on examining her, had found the left ovary enlarged, together with a cystic condition that was evidently of long standing. On questioning her I gathered that during menstruation, from her earliest girlhood, she invariably did everything as usual, including the household washing! With her arms in water, a damp apron round her middle, and her feet on the wet tiles, she would stand hours at a time! Surely more than sufficient to account for this disorder, dating from childhood's days, due to ignorance and lack of maternal foresight.

As I pen these words, a young mother has just been telling that, after her twin daughters were born, she was crazy for a son, and yet, being ignorant of the care she should exercise after this double pregnancy, she worked like a navvy when moving into a new house, and brought on the miscarriage of her much-desired son, with the disastrous consequence of having to lose her right ovary. She concluded her story with the words, " I was so young and foolish, and knew nothing about maternity, and now I have learnt my lesson too late! "

And so it goes on. . . . In the last century we read and heard constantly of the decline and demise of young girls in their teens, and countless tears were

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shed over these innocent lives cut short so soon. But how few realised the cause of the great majority of these cases? Had the truth been told one would know that, too often, it was the shock of puberty coming suddenly upon these children all unprepared, with its symptoms, terrifying in the unexpectedness of their onslaught, that caused them, in their affrighted ignorance, to seek furtively to hide their disability from their elders in such ways as to bring lasting disaster on their health and lives. As for the less tragic results of these stealthy methods of early girlhood, they are all round us still. Those women childless, neurotic, hysterical, undeveloped, or suffering constantly from mysterious aches and pains, which not infrequently they carry beyond middle age or to the grave.

That ill-health is the consequence of stupidity or sin is a platitude nowadays, but the indirect suffering, acquired through the false modesty of elders, by the innocent victims of such culpable silence is not to be viewed with complacency.

Every girl and boy loves a fairy tale as such, but none, blessed with an average brain, will accept it as a substitute for the truth. The twelfth year of the life of most individuals sees an awakening—a longing to grasp the meaning of deeper and more hidden things.

It is the birth of early adolescence; puberty is on the way and requires the mental satisfaction necessary to its healthful growth.

For the first time he or she desires ardently to understand matters, unnoticed, ignored till then, and, in the innocence of its heart, the child turns for guidance to the person it most trusts in its immediate entourage ; and blessed indeed are the parents who, being at hand, are able and understanding enough to offer information on those topics upon which they may be questioned. But there must be no lies, no shilly-shallying with facts. It must be the truth—draped, perhaps, touched with idealism possibly—with tenderness certainly, given out gently, in small portions, and never more than at the moment required . . . but *see it is the truth !*

Temporarily, like water off a duck's back, the information will slide off the child's mind, and with the satisfaction of a problem solved, it will return to its play.

Having had all things made clear, with that deference due to its nascent intellect that it expects and demands, the child will develop with Nature's truths inculcated within him or her, and there will be no rude awakening, no shock to the morbid susceptibilities of an under or over-sexed adolescent. Above all there will be none of those regrettable consequences following on a deliberately fostered ignorance of Nature and all its works.

II

BARRENNESS

“ Make for the shortest path, which is that of Nature, in other words healthiness. . . .”—MARCUS AURELIUS.

IT is only of latter years in the course of my investigation of the problem of sex determination that the continual accumulation of clinical experience involved in testing my theories opened up to me a new series of possibilities in the direction of the alleviation of sterility.

That the knowledge that I have so gained and been able to utilise is not inconsiderable, is attested by the increasing number of women from all parts of the world who have asked my assistance on this score, and who give me the incalculable benefit of the data derived from the records of their own cases.

There are a thousand suggestions that may prove helpful, for wives are apt to be unselfish or unthinking enough to worry little about their everyday health, provided they can eat well, sleep sufficiently and get about their usual routine without experiencing physical discomfort. It is only as the years pass and the childless hearth begins to pall, that the question is asked, “ Why have we no little ones ? What can be wrong with me ? ”

Then they may bestir themselves, and seek medical advice, and lucky are they that take things in time before the winter of womanhood has begun to set in.

How many letters do I receive that run thus : " I am quite fit, and there seems no reason why I should not have children." But on enquiring into the matter, what do we find ?

Any number of health laws ignored or broken, and nearly everything to be adjusted before the advent of offspring can be reasonably expected. First and foremost, it is sure to be discovered that it is the exception rather than the rule for the bowels to act regularly, without the use of aperients, as a daily habit, and that this has been customary from childhood. To say that such a state of things is deplorable is utterly inadequate ! How many aperients are there of which medical men can vouchsafe the entire harmlessness ? How many such quack medicines are there that do not contain aloes—a drug deadly to the body's welfare ? It is hardly too much to say that, with the exception of liquid paraffin and a few like preparations, there is scarcely a single aperient which, by persistent use, does not injure the bowel and work grievous harm on the human system. We hear a great deal about cancer being the result of a lack of vitamins and proper nourishment ; but what of the influence of daily aperients on what is termed " the stagnation zone," which is most apt to be in the abdomen, the stomach,

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duodenum, or even in the pelvic section? What of the vitiation by "opening" drugs and "salts" of the intestinal channels, with their delicate lining, throughout years of forced evacuation of their contents?

Dr. Mayr, of Carlsbad, emphatically declares that nearly all disease comes from the unhealthy state of the intestines, and goes so far as to attribute sterility in a large percentage of cases to the same cause¹. This leads us to ask what digestive troubles arise from? The answer may be found almost invariably in the words: "Wrong feeding and the habitual use of aperients"; the latter following on the former.

At the Osteopathic Conference held in London in August, 1925, it was pointed out with great effect by an American medical man that no subject has been so neglected by all schools of healing as diet. In a general way people were told a great deal of what not to eat in the case of certain disease; but nothing of what to eat to *keep well*. Yet, of the two, surely it is more important to know what to eat while well, for Nature has instituted a safeguard—the loss of appetite—in sickness.

Some things are so obviously undesirable that they hardly need mention. First and foremost, the French habit of the *aperitif* is responsible for much of the nervous trouble among those addicted to it, for a fictitious appetite is thus induced, and food taken for

¹ *Schonheit und Verdauung* (Dr. F. X. Mayr.)

which there is no genuine or natural demand is inevitably indigestible.

With the *aperitif*, the cocktail habit, its English and American equivalent, though of more recent date, is to be deplored, even when it is not 80 per cent. alcohol; but not much more so than the seemingly innocuous habit of imbibing soup as a prelude to dinner and even lunch.

The late Sir Anderson Critchett, the famous oculist, only a few weeks before his death, related the following story: A well-known chef, from a great London hotel, consulted him, and was told he would have to undergo a severe operation on one of his eyes. This he did, and when cured he said: "I am not a rich man, and have not been able to pay you all I should, but in token of my gratitude I will give you a piece of advice worth more than gold: 'Never touch soups!'" "Why not?" asked the doctor. "Because I know what they are made of!" said the chef.

It may be argued that it is easier to create a schedule of "don'ts" than one of "do's"; but before providing the latter it is necessary to specify the former, and here in a nutshell are some of the articles of diet to be avoided by the woman anxious to become healthy enough to beget offspring.

In the early morning let her eschew the cup of tea, which has been described as the "early cup of poison." The stomach has as yet done nothing to earn or deserve this dose of tannic and lactic acids

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combined ; instead, let her sip a half-glass of water ; it will act both as a tonic and a cleanser.

At breakfast the usual porridge is no good to anyone where something better may be had. Fried bacon and eggs are equally unkind to the newly-awakened digestive organs, and the ordinary white bread, with its complement of alum, is well apt to poison one's *joie-de-vivre* throughout the day.

At lunch-time, after meat, the milky pudding is a most mistaken article of diet, and as for the cup of coffee, black or otherwise, it puts the finishing touch to a meal pretty well disastrous to the average inside. In all cases vinegar and rich sauces should be carefully avoided.

At tea-time pastries and buttered toast clog, while they fail to nourish, and at dinner, the soup, meat—for the second time in the day—followed by puddings, dessert and the inevitable coffee are well calculated to lay the seeds of lasting disability ; whilst a sleepless night, as also that feeling of heaviness that accompanies a coated tongue on waking next morning, becomes an habitual condition which is accepted as natural by large numbers of persons who should know better.

One of the cleverest women I know complained to me of a constantly recurring headache, starting usually towards five o'clock in the evening. As she was chatting to me in her office, I noticed that she had been supplied with a large cup of black and

stewed-looking tea, whilst on the plate alongside a thick piece of rich currant cake awaited consumption. Pointing to the tea-tray, I said: "There lies your headache of this evening!"

Incredulously disdainful, my friend shook her intellectual head and dismissed my explanation as unworthy of consideration.

I have before me a letter written by the celebrated Sir Herbert Barker. "What is necessary," he says, "is to lead people *gradually* away from their soul and body-destroying diet habits. Most persons are better without milk after the earliest years, though the few thrive exceedingly on it. A pint of early morning hot water is better than a pint of early tea. White bread is poison to anyone, and all puddings are likewise the most evil of things from a diet point of view. . . ."

And now, having condemned so much of those foods in daily use, it is only fair to form a constructive dietary for those desirous not only of acquiring good health, but of keeping it with a view to possible pregnancy in the future.

The glass of water on waking we have already prescribed, and at breakfast a palatable meal may be provided by fish or eggs, boiled, poached or scrambled, accompanied by brown bread, toasted if required, or standard bread and butter, washed down by a good cup of weak tea.

At eleven or so a little fruit is good, or a glass of

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water, fresh or distilled, will prove extraordinarily refreshing and bridge the gap before lunch-time.

For the midday meal light meats, with plenty of vegetables and potatoes, followed by stewed fruits, or a salad flavoured with lemon as a substitute for vinegar, or cheese and biscuits, make a meal sufficient for the hardest worker. At tea-time, standard bread and butter and weak tea will deter the ordinary individual from indulging in a too heavy meal at night time.

The dinner should partake of the more humble nature of supper, and should be eaten in time to allow for a good two hours to elapse before bed-time.

Let it begin with fish, brains, sweet-breads or eggs, and if meat there must be, let it be little and light, with plenty of vegetables steamed rather than boiled, and as a substitute rather than an accompanying dish.

Then stewed or fresh fruit is sufficient unless a savoury is preferred, and barley water for both lunch and dinner, made with oranges and lemons, is as wholesome a beverage as can be desired.

We admit that this dietary might not prove over-tempting to the glutton, for whom Nature has but little use, but it is universally admitted by physiologists that in the past we have all been inclined to eat "not wisely, but too well," and it is a platitude to say that most people dig their graves with their teeth.

My own father, who made a life-long study of hygiene and physiology, was once visited by a relation, a fine and handsome man from the States. But, although only twenty-six, he suffered from the chronic American disease of dyspepsia.

My father pointed out to him that the sole cause of his trouble was overeating and determined to prove this to him. One night at dinner he had a large glass bowl placed by his side and into it put a portion of each course, including wine, corresponding to that with which his guest was served. At the end of the meal the latter asked the purpose of the bowl.

“Is it for your dog?” he inquired.

“No,” was the reply. “I would not dream of poisoning my dog with such a concoction. It is to show you exactly what you have put into your stomach . . . which, observe, cannot be more than half the size of the bowl!”

In a certain medical hand-book it is stated boldly : “You are what you eat.” This is an exaggeration, but it is not so far from the truth. To *nearly* everyone can be said : “Tell me what you eat and I will tell you what is wrong.” And of one thing I can speak definitely, and that is of the very satisfactory results of the system of diet as briefly described above. After a month or two of simple living: those doses of gentle aperient allowed, such as various derivations of liquid paraffin and other more or less harmless mixtures of the kind, will be gradually diminished

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and dropped; then the digestion, no longer worried by a superfluity of viands and wrong foods, and the bowels, no longer harassed by drugs, will resort to their original habits of natural functioning. For our bodies to remain, all their lives, active in every part, all the organs and cells must be nourished with natural food, fresh air, and sunlight; and it should be fully realised that inactivity of body must in time spell weakness and disease.

With the re-adjustment of intestinal disorder, a better condition of nerve health is established. Insomnia, which had been induced by the cup of coffee—now discarded along with the still more pernicious glass of warm milk, taken as a “night cap”—is replaced by the placid slumbers of the just, and the heart-symptoms, palpitation, etc., which in nine times out of ten are the result of an overloaded or inflated stomach pressing on the heart, cease to make themselves felt; for no healthy organ ever intrudes itself in the way of physical discomfort, and where the stomach is easy, the heart remains at peace!

And now that we have remedied the digestion, heart, and nerves of our patients—where, of course, the diet was mostly at fault—what is there to impede the likelihood of conception? It is here that we come to grips with actual local difficulties, and before proceeding further the following questions will require, from sufferers, an answer in detail.

1. What is the state of your menses ? Is there pain at these times ?
2. If so, in which region, the back, groin or the thigh ?
3. On which side ?
4. Are the periods too early and too profuse ?
5. Are they late and scant ?
6. Have you had any miscarriages or abnormal pregnancies ?
7. Recollect all details of your last confinement, if any. Was it difficult, or complicated by unusual after-symptoms ?

Where the answers to these queries give grounds for anxiety, advice should be immediately sought, and treatment prescribed.

When, on the other hand, the result of this self-examination is entirely satisfactory, it lies within our power to help on the work of procreation by those methods that Nature has been willing to provide.

In the first place, and here I touch on the keynote of my discovery, we must be most careful to choose those days of the lunar month when, after the rupture of the graafian follicle, the male or female ovum is set free and is receptive of fertilisation. The most useful of these days are the eleventh and the twelfth, counting from the first day of the period. Then again there are the twenty-first and the twenty-seventh days, bringing us up to the day before the next on-coming period is due. Many medical men

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prescribe a hot douche with some Condyl's Fluid or common kitchen salt shortly before union, as helpful in dispersing any excess of mucous at the mouth of the womb. A valuable hint may be gathered from the advocacy of the early morning as a proper and likely time for healthful conception, especially for those of nervous temperament. Both parents are reposed after some six or seven hours' sleep, and an additional hour or two of rest before rising are helpful in assuring the desired result.

It is during those latter two hours, after marital relations, that, possibly, the whole pivot of a probable impregnation may rest; for during that time the intelligent use of:

1. The genu-pectoral position,
2. The position of lateral decubitus

may help to determine, not only the actual conception, but also the sex of the future infant.

The first one is that presented by Dr. Arthur Eddis, and from results obtained, especially where there is any kind of displacement, such as retroversion of the uterus, it has proved of very real assistance. For, as is known, the actual fertilisation may not take place for two hours or more, and when the womb is tilted backwards, away from the vagina, the above mentioned position is most propitious for swinging the uterus to its normal place, thus enabling the seminal fluid to deposit the male seed within the proximity of the female ovum.

And it is because, in my experience, so many anxious women, in all trustful innocence, question me on such an intimate matter as the retention of the fertilising fluid after union, that I feel it is only right to give the assurance that, even as waves break on the shore, leaving the strands of seaweed in their wake, so also does the seminal fluid, after depositing its spermatozoa, cease to be retained any length of time after it has accomplished its ends.

That it may be helpful to retain it longer in certain cases, owing to the position of the mouth of the uterus, is a fact, and there precisely lies the advantage of the use of the genu-pectoral position.¹

Here is a case in point. A Mrs. B., aged forty-nine, who had been married close on twenty years, having had one early miscarriage some nineteen years previously, which had left chronic disability of the right ovary, came to see me after having followed my régime for four months. I had urged her to be examined by a gynaecologist of great repute, and he had told her that there was a slight displacement of the uterus and that the right ovary was cystic. It was here that I was able to advise the position above referred to, and submit to her that her one chance lay in trying for a girl-child, the left ovary being quite normal.

We chose the seventh day before the period was

¹ The position, that is, of leaning forward, with the hips raised and the head resting on a pillow.

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due, and, my advice was followed closely with most happy results in that she gave birth to a very fine girl, weighing 9 lbs., in September last, and has made a perfect recovery.

A lady in her forty-fifth year, who consulted me at very much the same time as did Mrs. B., had been married twelve years, was stout and pallid-looking, and much troubled with sleeplessness and indigestion. She was wont to sit over a pot of tea after her mid-day meal, resting till tea-time, and similarly after dinner. With complete change of diet and mode of living, her weight was reduced, her health vastly improved, and within three months she became pregnant, and has just given birth to a healthy boy, after an easy confinement. In this case again the genu-pectoral position was made use of.

This posture need only be resorted to for ten minutes or so, after which it is desirable to recline on the *right* side for an hour or two, that is, if a boy is desired and the date happens to fall early in the lunar month after a period; and on the *left* side, where a girl is hoped for, if the day chances to be nearing the next on-coming period. Of the expediency of this position I can only repeat that I have evidence from many authorities as to its value as an *aid* to fertilisation, and the pre-determination of one sex or the other.

It is safe to say that out of every hundred women afflicted with sterility—natural or acquired—it is

possible to overcome the disability in, roughly speaking, some 50 per cent. of cases. In regard to the others, we may submit that in many of these the husband may be at fault. Dr. Arthur Eddis goes so far as to say that 90 per cent. of all women suffering from "hopeless sterility" owe their misfortune to some infection suffered by their husband at one period or another of his life, no matter how remote it might have been. It is probable that very few authorities would agree to this high percentage; but if there are many such "sterile" cases in Britain, they are infinitely more prevalent in all those countries where State Regulation still obtains.

Wherever prostitution is legalised, there is admittedly vastly more immorality and venereal disease than in those parts where the mere fact of the toleration of recognised white-slavery, as an inherent part of state legislation, is viewed with abhorrence and indignation. Where State Control is in force, there flourishes the white slave traffic; where this traffic is in full swing, the moral standard is increased low and syphilitic diseases correspondingly high. Similarly where venereal troubles are rampant, sterility is increased in proportion.

Thus it is that when, owing to lack of self-control, liberty allied to morality degenerates into licence chained to vice, we see in the ensuing havoc wrought by evil, the innocent, along with the guilty, suffering from the revenge of outraged Nature.

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In conclusion it may be said that if, in a few cases, sterility is due to the previous faults or follies, not of the subject only, but possibly of her husband, or, more likely still, of preceding generations, the many may be comforted in the thought that their disability can be cured by a wholesale abandonment of the artificialities of civilisation, and a return to the simple and healthful laws of Nature.

III

ACTIVITY OR DISABLEMENT OF THE OVARIES

“When the governing part within us is in harmony with Nature, it stands in such a relation to the course of events as enables it to adapt itself with ease to the possibilities allowed it.”—MARCUS AURELIUS.

IN “Sex at Choice,” I have elaborated my theory of sex-causation, and it is not possible, in a short treatise of this nature, to deal with the actual subject of Pre-Determination, or of the causes and facts dominating this issue. Nevertheless, one or two essential truths must be made quite clear to those who have not studied my previous work on these matters, and one is the maleness resident in woman’s *right* ovary and the femaleness of the ova in her *left* ovary. That the ovaries work alternately, one month the left, the next month the right, is also a fact of primary importance; although the conception of both sexes may occur within the four weeks, with no possibility of impregnation in the following month, yet the one period is male and the next female. The reason of this is that the male ovum is projected into the uterus after the period

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of the right ovary, and the female ovum some eight days before the next on-coming period in the same month, betokening the activity of the left ovary.

Following this second period there should be (and in all normal cases is) a complete four weeks of quiescence and immunity from all conception.

Here then, in a nutshell, lies the essence of the workings of the ovaries, and once the scale of these activities has been thoroughly grasped, the rest of the seeming mysteries that hitherto had proved so completely baffling, assumes at once the orderliness of a tangled skein unravelled—the simplicity of a secret laid bare.

Perhaps one of the most important subjects in the study of sex-causation is that of the enhanced activity of the one ovary when the other happens to be, in some way, disabled for the time being, and this fact has played an important part in the solution of the problem of sex-determination.

There is hardly a woman living who, at some time, has not suffered from a temporary disorder of one ovary or the other. One may say that “nothing living is ever still,” but there is the weariness born of the effort made, and the repose required for the organ that has accomplished its shift. For it has been recognised that Nature makes provision for parts of the human body to rest at intervals, while other parts are employed, thus giving to every working group its period of repose. When organs are dupli-

cated and one or the other is weary or diseased, the opposite one does acquire an added vitality, and functions with increased efficacy by calling up its reserves and throwing them into the general action. This may be remarked with the eye or the ear, and again with the kidneys or the lungs even, where one has been destroyed, and the whole work has devolved on the remaining organ with comparative success.

Anyone of an observant turn of mind will notice how in certain families the sexes alternate with curious regularity, and how in others there will be a sequence of children of one sex, and then a run of the other.

Again, some women would seem incapable of conceiving sons, whilst others are equally unable to produce a girl. In such cases it may safely be assumed that there is some trouble with one ovary, which, though it may be in no way diseased, is sufficiently weakened as to render it *hors de combat* temporarily for all procreative purposes.

Whatever be the cause, this sterility of one side is highly distressing and difficult to overcome, although wonderful results may be produced by massage and clever treatment. Frequently an access of muscular health to the right side is brought about by a more strenuous mode of living, and exercise such as golf, tennis or walking may prove highly beneficial.

It was remarked with truth that a great increase of male children occurred during and after the Great

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War;¹ in my opinion this was no doubt due to the accession of strength acquired by the right side of those women who, in all the belligerent countries, were forced to do the work of men.

For the left side massage brings betterment and certain drugs may be beneficial in their effect. But where any disability is felt, to left or right, the best medical advice should be immediately procured.

This is confirmed by the opinion of the distinguished osteopath, Mr. Wilfred Streeter, with whom I have discussed the question of spinal lesions, and who agreed that in the wide field of osteopathic therapy may be found a specific cure for women who, owing to partial spinal disability, can produce children of one sex only.

Disability of one side or the other is often the result of a strenuous confinement or miscarriage. We hear constantly of acute or chronic ovaritis of one side or the other, according to the sex of the child which caused the trouble. Here are some instances: The wife of a doctor writes to me: "Owing to a fall six months before my second *girl* was born, my *left* side has remained slightly inflamed."

Lady C. writes: "Since the birth of my last little *girl* I have had continuous backaches on the *left* side."

A Mrs. H. similarly states that since her baby *girl* was born she has "every other month an acute pain in the *left* side, no doubt the result of my very strenuous confinement."

¹ See note at end of chapter.

And from Mrs. R. : “ I had a very bad pain on my *left* side before the birth of my baby *girl*, who died shortly after.”

In the last four weeks before writing this passage I have come across eight cases of ovaritis in the right ovary after male birth or male mishaps, and one of the left ovary having to be removed after a five-month girl miscarriage.

Here are some examples of the right side being invalidated after a difficult confinement or a mishap :

Mrs. M. writes as follows : “ My poor daughter has had a continuous pain in the *right* side ever since her *boy* was born fourteen years ago. The doctor says she should have her *right* ovary removed.”

Here is Mrs. B.’s account of her sufferings : “ I had a *son* who died one week after birth. Four months later I had a miscarriage—also a *boy*. After this my courses became so profuse and the pains in my *right* side *every other month* were so unbearable that I consulted a doctor, who said that I had acute ovaritis, and that the trouble in my *right* ovary was due to the bad confinement and ensuing mishap.”

Then Lady M. says : “ I had a miscarriage of a *boy* before the birth of my two girls, and ever since then I have had a constant pain in my *right* side.”

Many women complain to me of partial sterility following on the removal of one ovary or the other. Here is an instance : A lady writing from South Africa says : “ I am one of the unfortunates who

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have had ovarian trouble, and the *right* ovary removed before marriage. I have been married eight years and have two little girls only, aged seven and six years; I seem unable to have a son! . . .”

Mrs. P. writes: “On account of my little *boy* being born dead, prematurely and with instruments, I have had to have my *right* ovary removed, and have had none since. . . .”

Lady L. tells me: “I had a terrible miscarriage of a *boy*, and was very ill indeed, eventually having to have my *right* ovary removed. Since then I have had five girls. . . .”

On the other hand, a lady, having become pregnant of a little son, when over three months, became so ill with pains in the *left* side that she had to have an operation, and the *left* ovary, which had apparently been hopelessly diseased from childhood, was removed. She recovered, and, a few months later, gave birth to a healthy boy. Since then, in the past five years, she has continually desired girl issue, but when she came to see me I was unable to give her *much* hope.

The day on which I pen these words, I have seen two women suffering from the results of complicated births of *female* children. In the one, albuminuria showed itself a month before the birth of her first child—still-born, and although the mother has had four healthy boys since then, she still suffers considerable discomfort from her *left* side, and her longing for another *girl* has never been satisfied.

The other one—a French lady—had severe phlebitis after the birth of her second *girl*, so that she has been slightly lame in the *left* leg ever since.

A Mrs. L., from Cheltenham, has just written me in these words: “ May I say that your example of mishaps, viz., the first a boy, followed by a sequence of girls, are all verified in the experience of *many of my friends*, as also many of your theories as formulated in your book. . . .”

An interesting, though fairly common case, is that of a person whose first child—a *girl*—left her with acute ovaritis on the *left* side. Her symptoms were such that I warned her not to expect any further *female* issue. Both she and her husband were very desirous of a girl-child; and, not satisfied with my opinion, she consulted two specialists and underwent various treatments. In time she had three more children, but they were all *boys*.

The opposite case was that of a relative of mine who, in 1906, had a fine *son*, but she made so poor a recovery that, three years later, her *right* ovary had to be removed. Fourteen years elapsed before she was able to bear a second child, and it was, of course, a little girl.

Curiously enough, I know also of three cases of girls born, under very similar circumstances, after a lapse of *twenty years* since the births of their brothers.

I could, no doubt, go on citing endless cases of the after-effects of disablement of one or the other ovary,

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but it is invariably the same tale ; the *left* side disordered after *female* pregnancy, the *right* after *male*. And I turn to a letter, received this very day, before me, that runs thus : “ Having had my right ovary removed, and since then a sequence of girl babies, I am constantly assured that I have no chance of having a son ! *Is that so ?* ”

I am, alas ! obliged to answer : “ In ninety cases out of a hundred, yes . . . but there is always the slim chance that just so much egg-bearing tissue has been spared and remains in place as may possibly harbour a mature vesicle.” So convinced am I of the immutability of the law of the right ovary producing male ova only and the left ovary producing female ova only, that I confess it is difficult for me to realise the necessity for more, and yet more, evidence which is demanded by a certain type of critic. Yet to please them, I could, except that space forbids, multiply almost infinitely the cases mentioned here. And never—though “ never ” is a long word—have I come across a case which, once all the facts had been correctly ascertained, in any way contradicted the truths I have endeavoured to outline in this chapter.

It is because I know, only too well, the sad results of certain complaints on those organs, so delicate and easily injured, that it is with real dread that I hear of severe attacks of appendicitis (which, of course, as my readers know may entail an operation on the right side), or peritonitis, since they may have sad

consequences for a woman desirous of offspring. So many have sought my advice where sterility, as regards male issue, has been caused by a serious operation for appendicitis, happening possibly in early childhood !

Similarly where there has been a record of one or several attacks of peritonitis on one side or both, there results too often a condition of uni-lateral or entire sterility.

But sometimes I am able to relieve much anxiety by explaining certain of those facts usually ignored. Here is an example : A lady came to see me whose state of general health and nerves was deplorable. She told me that her dread of conceiving a fifth daughter was the whole cause of her trouble, and that she had never felt well since the birth of the fourth some four years previously. From what she said I gathered that she had acute peritonitis on the left side within a month of her confinement, and I was then able to assure her, from her symptoms, that she would never have another girl-baby. So relieved and delighted was she that her health promptly recovered and she was enabled once more to sleep calmly and eat more heartily ! This was a year ago, and now news of the birth of a son and heir has just reached me.

Then again, it frequently happens that disabilities follow the birth of a girl-baby ; sub-involution of the womb and similar troubles may continue for

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months, if not years, to the great annoyance and distress of the mother. Having suffered so much, she unwisely decides not to run a similar risk again, quite ignorant of the fact that were she to become pregnant of a male child, all her bad symptoms and anxious times would be brought to a conclusion, and with the budding of the new life, her constitution would regain its normal health and strength. So it is that the boy-baby carries off the incipient weakness of the mother, and conversely this often applies to the advent of a girl-baby after a disastrous boy-confinement.

To illustrate this, I would refer to a case that came under my notice recently—that of a miner's wife who, after the birth of her first child—a girl—suffered continuously from ovaritis and distressing left-side symptoms.

Even the sight of her left eye was affected, and a nervous breakdown ensued, partly due to the fear of repeating her unpleasant experience.

On her consulting me, my advice to her was clear and definite: "You must have a baby boy!"

Following my directions, she gave birth in due course to a perfectly healthy male child, and from that day to this she has been a strong and happy woman.

The right ovary is an absorbing study, so apparently different in its action and nature from the left. It seems to become increasingly active as the

woman advances in age and strength, and, provided there be no accident or untoward occurrence, it is more robust and *naturally far more prolific than the left one*. The question arises why this should be, seeing that no difference is discernible to the eye between the two organs, left or right, and an answer is imperative. There is, of course, always the fact of their very different situation within the human body; the left ovary being nearer the heart than the right, and therefore more likely to be affected by conditions relating to that organ.

There is no doubt at all that the left ovary is more liable to be affected by aberrations of the circulatory system than the right. This is evident at the times of menstruation, and, when a girl infant is being carried, by the heart-symptoms and other signs of circulatory discomforts being more noticeable. Perhaps it would be interesting to enquire incidentally whether there is any notable difference in the appearance of various brain cells situate on the right and left side! Can it be said that they are similar in character and attributes? It is outside the field of my studies, but I think not; and I fear there may be something of the same analogy between the ovaries, as there is between the two sides of the human face.

Biologists say that people with unequal faces—and these are in the majority—may be regarded as the halves of twins grown together. Had each half-

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developed, two individuals, the one bearing a face of equal lefts, the other two equal rights, would have resulted.

Certainly in some persons it may be noticed, in viewing first one side and then the other, that *no* seeming difference can be detected ; though there is no one but has the left side of his or her countenance stamped with some difference, however minute, as compared with the right. Where one side is less developed or marked with moles, it is usually the left side, the ear frequently being the only feature that happens to be smaller on the right side. And so with the ovaries, there must lie within them something undetermined, which is present in the one or the other, and which produces that condition or those conditions suitable to *maleness* in the one, and *femaleness* in the other.

Of the many various causes relating to the disorders of the one ovary or the other, it is hardly necessary to enlarge here, but in order to safeguard the activities of these organs, no unwise physical efforts of a violent nature should be made during the actual periods from girlhood upward, and all care should be taken to avoid any undue risk during the early months of pregnancy. The late Dr. S. J. Aarons has said very rightly : “ Thousands of ovaries have been sacrificed, which, if treated, need never have been removed.”¹ I would urge then, that,

¹ *Gynaecological Therapeutics*, p. 56.

whenever pain is persistent, on either side, and other untoward symptoms exist, medical advice should be sought wherever possible, so that neither ovary be neglected or disabled to the detriment of health and happiness, and ultimate procreation.

NOTE TO CHAPTER III

INCREASE OF MALE BIRTHS DURING AND AFTER THE WAR

The Registrar-General's returns show that for the year after the War (1919) the figures of births recorded were 1060 male to 1000 female. During the preceding 50 years the extreme range was between 1032 male to 1000 female in 1898, and 1049 male to 1000 female in 1916. "The exceptional preponderance of male births was greatly increased in 1919, when the excess of males was considerably greater than in any previous year since 1838."—Registrar-General's Report (1919) p. xxxi. By 1924 the figure for males had fallen to 1047.

IV

MISCARRIAGES

“Never a power without the lurk of a subtle snare.”

—F. R. HAVERGAL.

OF all the dire calamities that may overtake a woman in the course of her maternal career, that known as miscarriage or abortion is probably the worst, not so much in the actual event as in the pernicious results so frequently left in its trail. No less than twelve per cent. of all pregnancies end in abortion; if these mishaps occurred equally in male and female pregnancies there might be less to say, but unfortunately this is not the case, for while the left ovary is rarely disturbed by the accidental occurrence of female abortion, the right ovary frequently suffers irretrievably.

The truth of the matter is that roughly eighty per cent. of miscarriages are male, but the unpalatable nature of this anomaly causes many biologists to hesitate before acquiescing in its acceptance. Yet, among mothers, actual experience is so continually to the same effect that it is often believed to be universal, and on mentioning the percentage I am

frequently met with the reply: "I thought every woman knew that early mishaps were always male!"

Very recently a Scotch woman, after telling me of four miscarriages of boys that she had suffered, remarked ruefully: "Now I have six girls; it's amazing how they seem to cling, whatever one may do, before they are born; it's quite different with the boys! . . ." And she was by no means the first of her race to give me similar testimony, being only one of many observant women in an observant nation!

In the past year or two I have occasionally been taken to task for quoting these figures, so, in order to obtain entirely fresh evidence, I have gone carefully over the correspondence of some four hundred women received within the past few months. From these I collected thirty-five cases of *male* miscarriage from four to six months, twenty of *male* miscarriages of under four months, all of which were to be recognised as marked by definite symptoms of *right* ovary complications.

Of *female* abortions I was able to collect eight only, all happening at five months or thereabouts. In each case the ensuing symptoms were on the *left* side.

I would mention that in the past twenty years I have been unable to gather any evidence of ovarian symptoms of the *left* side after *early mishap*. And seeing how clearly denoted are the characteristics of right side disability, we may with certainty conclude that early female miscarriage is exceptional.

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Of disordered symptoms resulting from a more advanced miscarriage I would like to cite a number of examples. Here are some of disability after girl issue :

A lady from Jamaica, who is very anxious for a child, writes : " I had the misfortune to lose my little girl, still-born, at five and a half months. Ever since then I get the most cruel pains on my left side. . . ."

A poor woman came to see me who was suffering from a perpetual ache in her left ovary and other troublesome disorders, after a five months' mishap. Realising her sad position, I prevailed upon her to consult a prominent gynæcologist, who was able to treat her successfully. She had contracted some infection from her husband, which had killed the female foetus and poisoned her ovary.

Perhaps it is not generally realised that once the sexual apparatus has become internally infected, there is a great tendency to relapses and complications after the most trivial operations ; and, whether from adhesive changes taking place round the ovaries and tubes which interfere with ovulation, whether from some chronic ovaritis, or from the secretions found in the genital passages interfering with the vitality of the ovum and preventing proper and full development, the fact remains that a large number of women thus afflicted prove sterile for ever after !

But distressing as are these mishaps resulting directly from syphilitic infection, I must add that,

personally, I have not come across, so far, any male abortions over four months induced by a tainted father. Whether they happen earlier I cannot say, but all those "directly tainted" prematures that have come to my knowledge were girls. Does not this rather tend to prove that the female ovum is much more thoroughly affected by the male parent than is the male ovum, which seems to be more protected, and more amply imbued with the attributes and health condition of the mother at the time of conception?

There is an old belief that miscarriage is very apt to prepare the way for fresh pregnancy. Is it not, rather, far more prone to induce either a series of mishaps or those wearisome symptoms conducive to subsequent sterility? And that is precisely why no miscarriage, however slight, should be ignored. Where a doctor is not at hand it is well to know that after such a mishap, assistance to the organs can be afforded by lying up at each ensuing period for at least the first day or two. It will take a whole nine months to heal the scar—or *corpus luteum*—from whence sprang the ovum for the interrupted gestation! If the injury is severe, any child that is born must be from the opposite ovary—and therefore of the opposite sex. If not, and it be of the same sex within the year, there are nearly always unpleasant symptoms of bearing down and other troubles all the way through till parturition.

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Where there is retroversion of the uterus, which, according to many authorities, is the most usual cause of early abortions, it is very difficult to carry a male embryo.

The explanation of this is simple. The male fertilised ovum is projected lower down in the uterus, its attachment taking place nearer the cervix, or opening of the womb, than does that of the female ovum; and it is safe to say that, although the left ovary may be more easily prolapsed than the other, the right ovary and tube are naturally, unless the colon be empty, pushed more to the right and slightly lower down than the corresponding organs on the left side.

That the womb swings naturally more to the right may be noticed immediately after parturition, where a woman can feel with her hand the uterus, as hard as a cricket ball and about that size, lying above the bladder well to the right of the mid-line.

The moment the female egg is impregnated, it moves to a place of safety, embedding itself in the mucous membrane high up in the walls of the womb. Possibly the time of ovulation is more propitious also to its retention than is that of the fertilisation of a male ovum.

Thus it is that thousands of women, who could never carry a male child to full term on account of some uterine weakness or cervical irritation, may bear a female child fairly comfortably right on to its proper time.

Frequently I am told by mothers : " I only just saved my baby from miscarrying by going to bed directly I noticed the first signs of trouble."

In those cases, especially where there is some show of discharge, the child is nearly always a girl. Were it a boy, and had the flow persisted to any degree, the embryo would certainly have come to an untimely end.

I have known dozens of women who have had their periods regularly for the first few months without either mother or child having suffered from any bad consequences, provided the infant was a girl.

It is true that some mothers may carry a boy nine months, having a menstrual flow every four weeks, but I myself have never known the child to survive his birth by more than a week or so. When the demand on the developing process is accentuated, the vital organs are too weak to operate, and I have had this fact substantiated by a medical man with a very large practice, who has made a point of examining this anomaly for a number of years.

Against the dangers of miscarriage one cannot warn a woman too often. A very eminent gynaecologist once said to me : " To all young women, taking undue risks during pregnancy, I would fain scream on the house-tops : ' Beware ! Beware ! You are juggling with your whole welfare—with your life ! ' "

But although many mishaps are brought about by carelessness or sheer stupidity, others are caused by

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some real disability or local trouble, which may be remedied by a little proper surgical treatment.

Take, for instance, retroversion, as before mentioned. It may be easily recognised by a distressing pressure on the rectum, felt every now and again, especially at night time. If it is taken in time, within the first few weeks of pregnancy, it can often be remedied, temporarily, at any rate ; but if nothing is done, a mishap is only too apt to occur between the sixth and ninth week.

A lady asked my advice after having suffered three of such mishaps. She was most anxious for a son, and at my instigation consulted her doctor at the first signs of pregnancy. He supplied her with a pessary to maintain the womb in position for the first three months, after which, the organ, with the development of the foetus, righted itself. Subsequently the ring was removed and the child was carried a full nine months.

Those who have once aborted ought to be extra careful in succeeding pregnancies, at every month especially, bearing in mind the possibility of a recurrence throughout the first six months. There is a very cogent reason for avoiding all aperient medicines, if possible ; nearly all quack aperients contain aloes or equally deleterious drugs, which prove injurious. In fact the action of all strong purgatives, particularly those of the aloetic kind, are most dangerous.

Another cause of miscarriage may be the habit of taking very hot baths. A girl, married barely a year, who was anxious for children, had got into the way of soaking in her bath for nearly an hour every day. As the water cooled, she would add fresh steaming water to keep up the temperature.

I remonstrated with her repeatedly against such a self-indulgent and weakening practice, but all in vain ! After a time she had first a still-born baby girl, followed a year later by a male miscarriage, and this up to now has proved to be the last chance of maternity vouchsafed her, eight years having elapsed since it occurred.

A word should be said regarding the advisability of motoring during pregnancy. Numbers of women have told me that they laid their miscarriages at the close of a long motor or char-a-banc drive, or that they fancied their mishap was due to too much motoring in the first few months.

It is possible that, in many cases, there were more serious causes for the trouble, and I think that, provided the car be not jolty and the journey taken not too long and tiring, there is little ground for altogether eschewing motoring during pregnancy. However, opinions differ on this, and the extreme of caution is found in the words of the late Dr. Wilde, of Weston-super-Mare, who used to tell his cases : “ No expectant mother should travel *on wheels* ! Her legs are safest ! ”

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It is the utter foolishness of some young women that causes one to deplore human irresponsibility, especially at a certain juncture of their lives.

A woman, possessed only of a little daughter, had longed for many years for a son and heir. She had been in the habit of taking horse exercise ever since her marriage, and this had continued to within four months of her little girl's birth with no ill effect. Finally she became pregnant of a boy, and continued her daily rides in spite of my repeated warnings to her. As a result she was delivered prematurely of a still-born boy. To add to her grief, her husband died the following year, and the family title and possessions passed to a distant cousin !

Such happenings are of daily occurrence, with the same inevitable results in the case of boy pregnancies.

A delicate woman who, after ten years of married life, started a first baby, wrote, overjoyed, to tell me her news. She was then pregnant four months, and she asked me whether I thought she ought to continue to bathe in the sea as she had hitherto done. To which I replied by return : " Most certainly not ! " But the damage had already been done, with the result that soon after she miscarried of a son.

When there are admittedly some untoward symptoms it is not wise to start a pregnancy without first obtaining professional help. A lady who was anxious, on account of her age, to lose no time in

attempting to produce a son, came to see me whilst in a very poor state of health.

I assured her, from what she told me, that she could not carry a son full time until she had been surgically attended to. Of this she took no heed. Two months later she became pregnant, but miscarried of a male foetus. Subsequently she was obliged to undergo a far more drastic treatment than would have been necessary before the mishap occurred, and it was, in fact, three years before she was able to produce a living male child.

Miscarriages are most apt to occur at the second, fourth and sixth months. At the third and fifth they are less likely, and very often miscalculation causes one to imagine a gestation to be less or more advanced than it really is.

A so-called "Mole" or "False Conception," occurring at those times, has seldom any connection with an impregnated condition of the womb, and may arise from causes quite apart from this state.

As regards the comparatively rare three and five month female miscarriage, it is generally caused by an unhealthy condition of the generative organs or the foetus itself. It may happen when the mother is suffering from acute physical exhaustion, produced by a too rapid sequence of pregnancies. Of these cases I have collected only a few, and from the poorer stratum of society. Occasionally it may happen after a severe accident or as the result of

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fever, or some illness where there are feverish symptoms of severity and duration. But as a rule the cause is far more likely to be some disability on the part of the father.

In conclusion we may suggest that while a woman, in a majority of cases, may be exonerated from all blame if she miscarries of a girl, a certain degree of censure is not unmerited by those imprudent mothers who, through lack of understanding of their responsibilities and by refusing to use their commonsense during pregnancy, bring about the fatal mishap which so usually proves to be an embryo of the male sex.

V

CHILD MURDER

“Sin may be clasped so close we cannot see its face.”

—TRENCH.

IT is without any kind of pharasaical complacency, but with fear and horror, that one should contemplate the disastrous habit, of a distinctly novel or “modern” character, now current amongst young women, who, without a qualm, rid themselves, in the early days of pregnancy, of undesired offspring. I have come across too many of these cases lately not to be seriously alarmed at such propensities in certain of our young wives. They are mostly of a pleasure-loving disposition, bent on those pastimes, such as out-door sports, dancing, etc., which among some people are apt to become a craze, to the detriment of all home instincts and interests.

Such women tell you unblushingly how, seeing that certain fashionable race meetings were pending, or that the hunting season was coming on, they took a “dose” calculated effectually to destroy a little life on the way; because forsooth it had barely started on its journey, they having not as yet experienced its first flutter towards existence, it was

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in fact of no account, and that such a proceeding really did not matter at all—and was in no way reprehensible or open to censure.

We might expect such things to take place in countries from which ordinary morality has been successfully eliminated: in Russia, for instance, "where all is dark," where the status of women is derisory, and where marriage—easier than the purchase of a broadcasting licence—can be dissolved by a "husband" taking his "wife" before a local official and there discarding her.¹ In 1921, no less than seven thousand "*legalised abortions*" were performed in the Moscow hospitals on either girl students or on married women.² This is the less to be wondered at when we realise the fact that 80 per cent. of the boy students in Soviet universities live with girl students, and that not only are they unable to earn enough money to keep a child, but are naturally averse to parenthood. In England with its claim to high civilisation, that any such massacre of innocents should be resorted to is more than one can accept with equanimity.

If no woman should think lightly of a miscarriage of even a few weeks, how much more has she reason to fear, and refuse to lend herself to, the horrors of a wilful abortion. She must realise that any great

¹ Report by Sir Percival Phillips, Correspondent for seven years in Russia. 1924.

² Yaroslavski's report to the All Russian Central Executive Committee, October, 1924.

loss of blood saps the very foundations of life, and that it takes many years for a woman to recover, if she ever does completely, from a serious abortion. But this is little as compared to the after effects of the drugs that a potential though reluctant mother, in her ignorance of the consequences, may resort to, with the erroneous conviction at the back of her mind that she can remain able to conceive again at any time when it suits her book ! Unfortunately she is unlike the " Wise Man of London," who

. . . " jumped into a bramble bush
And scratched out both his eyes ;

.

But when he saw his eyes were out,
With all his might and main,
He jumped into a quick set hedge
And scratched them in again."

Once a woman's ovaries are destroyed or affected, she cannot remake them and undo the injury.

It should be emphasised that the greater number of abortions, provided of course that they be those of married women, are purposely brought about from a sudden sense of fear, of despair, where the circumstances happen to warrant no support to the material responsibilities ultimately involved, rather than to a deep laid design to avoid at all costs the unexpected pregnancy.

Here are two instances :

The first is that of a fine, healthy girl married to a reckless gambler. During one of his more steady

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intervals she embarked on a pregnancy to satisfy her maternal cravings. Financial disaster soon overtook the husband however, and, in despair, on the advice of a would-be friend, she took certain measures, which, within three days, relieved her of her infant; but it left her weakened and ill for nearly a year. Soon after this she became pregnant once more, and though pleased at first, as the months went on and her husband's position became complicated by his addiction to drink, she resolved to make a second incursion to the realms of abortifacient methods. But the drugs had no effect this time, and affrighted she decided to visit a professional abortionist recommended by her friends.

After undergoing a ghastly treatment at the hands of this ghoul, she was told, on returning to consciousness, that a female child had been duly removed. But the recovery was slow, owing to great loss of blood and septic trouble that had set in at the time. It was ten years later that I was asked to help this poor lady. She had divorced her first husband and was happily married to a charming man, who above all things desired a son and heir. Alas! I realised at once that the calamitous methods of which she had been the willing victim had utterly destroyed the vitality of any ova she might still possess, and that the womb was in a state of chronic inflammation.

I begged her to see a clever gynaecologist of my acquaintance. This she did, with the result that

shortly after she was forced to undergo a very serious operation for the complete removal of the generative organs, from which she had not recovered when I last saw her.

The second case is that of a young woman who, married to an ex-soldier, became pregnant of a child. Unemployment supervened, and the father grew irritable and began to dread the advent of an infant in the small attic that had become their home. In pique, the young girl consulted her neighbours, who advised her to get rid of the child.

The methods employed produced the desired effect, and the young wife recovered, thanks to her naturally strong constitution.

A year later, with prospects more promising, the young couple decided once more to have a baby. But, shortly after, the husband developed a love of drink, and with the increase of this vice the money ceased to be brought to the home. Furniture acquired the knack of mysteriously disappearing, and with each vanished item the hopes built up in the prospective mother's breast were slowly but surely shattered. This time, ashamed to consult her neighbours, she took, on her own account, various concoctions and made herself very ill, but, as it happened, nothing moved the little embryo, firmly implanted, and determined to live and have its say in this troublous world. Terrified, she went off to consult one of the female monsters who are willing to under-

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take what amounts to pre-natal child murder ; there is, it is true, a certain risk to themselves, though the prospects of evading the law in this respect are greater than they should be. To her she explained the methods she had already resorted to in her desire to be rid of the infant, whereupon this woman exclaimed : " Then there is nothing for it but drastic treatment ! Evidently it is a female child, and nothing short of that will move a girl ! "

At this suggestion the mother hesitated . . . and was saved !

Returning home, she carried this child its full time, and then went to the hospital, where the baby girl was born after a terrible confinement which nearly cost the lives of both parent and child.

The after effects of such a history on this woman's maternal organs were such as to produce a chronic condition of ovaritis on the right side, and on the *left*, owing to the strenuousness of her confinement and the poisoned ovary, there remains a continuous, if slight, pain in the left groin which becomes most distressing at every alternate period.

Perhaps it is not generally known that three thousand women die every year in England and Wales as the result of child-birth ; that is, four in every thousand. We talk of the dangers of the coal mines, but only one man out of every thousand is the actual toll of a miner's calling in each year. It is thus four times as dangerous to bear a child as to work for

a year as a miner. But it must also be understood, and this fact needs emphasising, that according to the calculations of Dr. Janet Campbell, a good third of these deaths in childbed are due, at any rate in industrial areas, to abortive measures previously resorted to by the victims of such malpractice.¹

A lady, who wrote to me from the United States, says in her letter: "On his return from the war my husband was so poorly that we decided not to have any children till he got well. At two different times I became pregnant, and, acting on the advice of an elder person, I took a certain mixture. I was quite ill, and my urine became thick with blood, and was terribly painful!"

Her husband had died, and she had remarried when she wrote to ask me to help her as, according to medical opinion, she seemed to be hopelessly sterile in consequence of maltreatment of herself.

One wonders how it is that people, ignorant and often ill meaning, are allowed to obtain dangerous drugs from any chemist, under the most flimsy pretexts—drugs which are apparently sold in quantities sufficiently ample for the infliction of death on untimely offspring and lasting disaster to those who employ them. Should it not be made illegal for any person to purchase such ingredients without a special medical prescription, and one made up to date and

¹ Report on Maternal Mortality [1924]. Also *Ethics of Birth Control*, p. 120.

verified ? It is rather apart from my main subject, but I have particulars of the case of a doctor's widow, who systematically obtains from her chemist a prescription of some components, doubtless found amongst her deceased husband's possessions, which when taken, keeps her completely drugged and stupefied for a week at a time !

It cannot be too emphatically impressed on all young women that the dangers of criminal abortion are so far-reaching as to extend throughout a woman's life, and lead to an early grave.

And yet, how often I hear tales such as : " I know a woman who has suffered repeated abortions. A very clever man treated her, and there were no ill effects ! "

To which I reply : " How long ago was that ? Tell me more about her in ten or fifteen years' time ! "

I know only too well that there are few sins so terrible in their direct consequences as that of pre-natal child murder.

Some years ago a lady told me that she would never know peace of mind in this world again. She was a nervous wreck and no little children had come to grace the hearth and home of her husband and herself. After a heart-to-heart chat, she finally confided her secret sorrow to me. As a bride she had been admired, spoilt and was over fond of going about enjoying social gaieties with her young and adoring husband. It was, therefore, with horror that, after consulting a doctor, she found herself, in spite of the

use of artificial contraceptives, some two or three months pregnant. She made up her mind that she simply could not go through with it. She imagined that her figure would be spoilt, her pleasurable existence interfered with, and her husband's affection diminished. In her despair she sought advice from a smart society woman, under whose malign influence she had recently been. This woman persuaded her to go off alone to Paris, under the pretext of buying new Spring clothes, and to place herself in the hands of a female who was making a fortune out of the fears and terrors of ignorant and foolish women. It was to the apartment of this creature that the young bride fled, and submitted herself to her nefariously skilful methods. These succeeded in removing a healthy male foetus of over four months' development.

The mother, relieved, though completely unnerved and exhausted, paid a big sum for this horrible deed, only, on returning to her husband two weeks later, to collapse utterly when he remarked to her gently on noting her depressed condition: "I had so hoped you were going to have a baby! I never liked to say anything before, but my dearest wish is to have a little son. But now it seems more like a long rest cure that you are in need of!"

Alas! The rest cure lasted over a year, but neither that nor any other treatment has ever done more than patch up the destroyed health of the unhappy wife, whose grief at her childless state is more than

shared by the husband, still ignorant of his wife's tragic visit to Paris.

All the victims of such malpractice do not escape as lightly even as the above-mentioned lady, since of the immediate dangers of instrumental abortion septic infection is a constant factor in bringing about a fatal issue.

“ Nothing can alter the responsibility which is laid upon each soul ! ” But it is ours, that responsibility, and we are more than blameworthy if, knowing these things, we are silent, or look the other way when a word of warning may have the effect of deterring one single soul from the horrors that attend such a criminal violation of the statutes of Nature.

VI

LIMITATION OF FAMILIES

“Birth Control . . . is compatible with a large as well as a small family ; it stands for Choice, not Chance, in the production of children.”—LORD DAWSON OF PENN, M.D., F.R.C.P.

ON reading to what lengths of desperation certain sections of our population resort, one is tempted to deduce that anything is preferable to such measures, even to placing the secret of Birth Control within the reach of all young married women in order to deter them from such horrible practices as I have outlined.

But it should be pointed out that in none of those cases above related would contraceptive methods have been of the slightest assistance ; in fact, as may be noticed, those artificial means were used before the culmination of the tragedies.

And that is precisely the reason for my inability to accede to the view that Birth Control can obviate all such troubles, as well as many of the existing social ills.

If this were so, France, the example, par excellence, of a country where such methods have been universally applied, and whence originated the greater part of

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these inventions, would be freer than we are from the irregularities and vices that Birth Control is supposed to cure.

But that this is not the case, all lovers of France must readily, if regretfully, admit.

At the same time, in view of the narrow, if not blind, prejudice surrounding the subject, it would be well to view it dispassionately, in all its aspects, taking a wide survey of the problem, with its social influence and hygienic effects on our nation as a whole.

We know that there are still far too many people whose attitude is reminiscent of the ostrich, and with the views of such persons one can have little sympathy. "Happy countries have no history," and contented people ignore those misgivings and restless strivings which are at the root of every innovation. The period of the past fifty years has specialised, more than any previous one, in the crude facing of facts, and in frankly regarding the shortcomings of humanity.

At the source of all discovery lies discontent against prevailing conditions ; indeed it is the driving force, the irresistible motive power of those who, challenging all traditions, strain most recklessly towards betterment.

This is the psychology, applying as it does to practically every pioneer of civilisation, that can claim the honour of having lifted mankind from the depths of barbarism, from the morass of stagnation. Those

who share that craving to right certain evils, accepted hitherto as inevitable, acquire readily an understanding of the pressing necessity of advancing with the times, or a little ahead of them. They realise that, if we cannot put the hands of the clock back, we can regulate it so gently as not to break its tender mechanism by too violently pushing it forward.

There is a school of thought, not without powerful backing, and for the most part entirely sincere in its convictions, that endeavours to allay public anxiety regarding the consequence of rash and haphazard marriages by suggesting means to limit the number of children, so that this bugbear of the poor, a large family, may not count as a deterrent to marriage. And whatever we may think of the moral side of this question, its advantages or disadvantages, we have to recognise that the practice of contraception has become widespread before there has been time to think out its implications, ethical or economic.

The extension of the practice began soon after 1880, and in Europe the fall in fertility between then and 1911 was close on 20 per cent.

In Ireland, where there was much poverty, there was no fall in the birth rate; in prosperous Saxony there was a shrinkage of 40 per cent.

Thus it must be inferred that the sudden development of Birth Control was due to improvements in the means of control, to the invention of new powers over Nature, rather than to any change of economic

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conditions, which might have increased the need for restriction of families.

On the contrary, the year 1880, when the use of preventives became prevalent in Europe, falls in a period of industrial expansion, during which prosperity and the standard of living rose continuously in most, if not all, of the countries concerned.

In 1884, certain fresh inventions and methods, emanating from France, still further popularised this practice which, it must be admitted with perfect impartiality, was due almost entirely to what may be termed the accident of invention, rather than to any widespread sense of its necessity.

According to Sir William Beveridge, "the fall of the birth rate has been accompanied in many, though not all, countries by a fall in the marriage rate, equally sudden and equally inexplicable by economic change. The agreement of date and the analysis of certain Dutch statistics suggest the same cause in both phenomena, i.e. that the power of Conception Control is being used to postpone or avoid marriage, rather than to encourage it."¹

Moreover, the dysgenic tendency has increased materially in the last fifty years, the gap between the classes in respect of fertility having been widened in the wrong direction. Those classes which by economic standards are most valuable to the community are contributing less than their fair share to the next

¹ *Ethics of Birth Control*, p. 168.

generation, whilst those which are least valuable contribute more than their share.

For instance, Dean Inge, in one of his "Outspoken Essays," points out that before 1870, 143 marriages of men whose names appear in "Who's Who," resulted in 743 children, an average of 5·2 each; at the next census the average was only 3·08.

A striking fact is that the less some measure of Conception Control seems necessary, the more it appears to be practised. A leaflet issued by the Malthusian League claims that "practically all the married people of the richer classes now use preventive methods."

But they are precisely the people who should have large families. If the reason for an only child or one of each sex is not a natural one, it can only be due to the spirit of self-indulgence or undue parsimony.

A French lady told me she had only had one child (and her friends acted similarly), because she wished it to have as much wealth as she had when she married.

This woman was rich and self-centred, and her little girl spoilt and over-indulged, clearly a case where two or three more playmates in the nursery might have proved more profitable in the long run to the community at large, as well as to the happiness of the child itself, even if they decreased its material chances, which is by no means to be taken for granted.

How many of my friends in the past have told me

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exultantly how they had arranged to have just two children, and would not dream of being so imprudent as to have a third. To these homes precisely came such and such an accident or disease to carry off the one, and the war to take the other !

Where shall we be if every British mother elects to produce only one son to fight our battles for us ? In Germany there is to-day the same population as in 1908, in spite of her war losses, and the forfeiture of large and populous provinces.

As the trustees of posterity should we not avail ourselves of the privilege of filling our country and our Colonies with our own Anglo-Saxon stock, which, in itself, is still the finest in the world ?

Certainly by so doing we should reap the benefit of producing a third, fourth and fifth child, which, in the average family, are more frequently than not the finest and the most intelligent.

As Lord Dawson says : " A family of less than four may be a necessity, but it is none the less regrettable . . . in too many instances homes are without sufficient children, to their own detriment and that of our nation."

Mr. Casper L. Radfield, the American authority on heredity, says that he can prove that the more children a woman has, the longer she will live. He states also that an only child stands the poorest chance of going down to posterity as a great man.

According to Erasmus, Dean Colet's mother

reached her ninetieth year in spite of having borne twenty-two children, and looked so smooth and was so cheerful that you would not think she had ever shed a tear. The wife of John Speed, the chronicler, was the mother of eighteen children and yet lived to celebrate her golden wedding, and many other examples of twenty-two and twenty-four children being born to one wife may be cited, in which a ripe old age was attained.

We know that a race made up from first children is doomed to premature decay and extinction. The mere fact of being a member of a family of anything over four children, in itself, enhances a child's preparation for life, as much as the fact of being an only child hinders it.

Have not the world's best men and women, more often than not, been members of large families, and was not the self-discipline, needed in a home of moderate means for bringing up several children, a greater asset to the family and the community than the comparative comfort which may result from a further reduction in the number ?

While keeping an open mind, one is forced to submit that, as a matter of fact, the evil of large families, or too rapid child-bearing, has been much exaggerated in current publications. Such cases are not at all in the majority, even where no preventive measures are adopted.

Conception is never a certainty ; it depends on

the chance of the male sperm being able, at the right moment, to fertilise the germ of the female. According to French authorities, on the average there is one result in five hundred, and in that country such a percentage is considered a reasonable rate!

It must be remembered that large numbers of women do not produce offspring in any event, the percentage having been, a generation ago, one in eight. In France the figures are higher, and the causes for this may be touched on later when dealing with the subject of contraception.

Here are the figures representing the average number of children born at child-bearing age.

In Scotland, for instance, among wives from fifteen to twenty, one child is born in two years.

From 20-25 there is an average of 42 per cent.

From 25-30 of 36 per cent.

From 30-34 of 30 per cent., and after that a much smaller percentage.

To keep the population stationary, after making allowance for the men and women who remain single, and for the fact that one marriage in six has no living issue, it is necessary for parents to provide, on an average, 3·1 children.

In the past, the sterile marriages, or those of one or two children only, were amply discounted by the fruitfulness of others, but where such families cease to exist, only by the universality of the three child

system can our population be maintained at any kind of stationary sufficiency.

On the other hand, if we are "einseitig" as the Germans say, or one-sided in our outlook on life, we are apt to view it from a wrong angle altogether. There are two distinct sides to the question of Birth Control. The one I have endeavoured to outline as above; the other I must touch on in the next few pages in an endeavour to show that, undeniably, there is a very strong case for family limitation in special instances. In order to appreciate the real state of affairs we are bound to examine into the conditions of motherhood, not only in the poorer areas, but also among the well-to-do of our nation, and this aspect is allied to the health of the children, since it is obviously bad for them to have mothers whose constitution is undermined by too frequent pregnancies. Most women need a period of rest and recuperation after the strain of pregnancy and nursing.

Those who have experience of the lives of married working women are agreed that fear of pregnancy often makes a woman dread marital relations, with the result that conjugal life becomes unnatural. In the last generation many cases can still be cited of women leaving their husbands or living under the most strained relations on account of their dread of possible pregnancy coming too soon after a previous one. And we know that many an estrangement has originated from this source.

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When one meets a woman, who, having had twenty-one children in some twenty years, has but eleven living, and the last three puny and backward, it is obvious that she would have been happier could she have chosen the number of her children and at what intervals they should be born.

It certainly cannot be desirable that a woman should dread her husband's approach, yet this is commonly the result of too frequent pregnancies ; and so manifold are the problems of this nature with which we are confronted that I feel inclined to agree with Miss Maude Royden when, with obvious sincerity, she submits that contraception is desirable where the alternative is :

1. Unfaithfulness . . . on the part of the husband who refuses to use self-control.
2. Undue nervous strain where self-restraint is attempted.
3. The birth of an unwanted child.
4. The birth of a diseased child.
5. The exhaustion by child-bearing of the mother.
6. Indefinite postponement of marriage, unless the number of children to be born can be limited.

To those theologians who point out that Birth Control may constitute a social danger because it may lead to immorality by removing the risk of conception, it is only fair and right to reply that the inference that the world's standard of sexual

morality is going to be considerably lowered by Birth Control is much exaggerated. It must be admitted with frankness that prostitution has existed from time immemorial, and that the birth of illegitimate children has been a constant incident in all ages.

Equally significant is the fact that, had the procreation of offspring been the sole purpose of marriage, and the desire for sexual intercourse merely an instinct implanted in all animals to secure the continuation of the race, man and woman would not have been endowed with the capacity and the wish for marital relations, under circumstances when impregnation cannot ensue, or when it is not desired by either parent.

There are cases where a wife may be informed by her doctor that another pregnancy might prove fatal. There are others where the conditions are so unsatisfactory that the advent of an addition to an already large family would prove "the last straw." I know, for instance, of a family of eight congregated in one small attic, divided by a curtain into two parts. In the one the parents sleep with their two infants in the one bed, in the other is a large couch filling nearly all the available space, on which sleep the four elder children. Those who have worked among the poor have seen many such instances of shameful overcrowding in our slums, and one must admit that for children to be born under such conditions

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spells not only grave discomfort, but an utter lack of decency and hygiene.

These are a few of the reasons that actuate the champions of Birth Control, and so far as they go they are reasonable if not righteous.

But it is my belief that our energies should be directed towards minimising and obviating the unpleasantness, the discomforts, and above all, the dire results that attend the growth of the unnatural and subversive methods in current use.

At the same time, realising all these various factors, and allowing for multiple exceptions, in regard to which all reservations and allowances should be duly made, I appeal on national and imperial grounds to the great mass of my country men and women to do their duty conscientiously and unselfishly by bringing forth, so far as their health and means will permit, an ample supply of children fit to carry on the traditions of the race.

Cranks and faddists may pretend that patriotism is based on selfishness, and doubtless it might be selfish of us to wish that the whole world were peopled with Anglo-Saxons ! But, until the black and yellow races and all other peoples of the globe have agreed to curtail their own populations so as to meet the potential limits of world production, is it wise to lend ourselves to a wholesale and indiscriminate practice of mechanical and chemical measures of contraception ? Should we not, rather, when individual cir-

cumstances and conditions render it advisable and desirable to do so, make full use of those means for the limitation of families which are equally reliable, infinitely more beneficial, and above all, innocuous, as offered by the simple yet supreme laws of Nature ?

VII

THE ARTIFICIAL WAY

“ Let fact be fact, and Life the thing it can ! ”—CLOUGH.

WHATEVER may be said in public or in private about contraceptives as the only means to accomplish conception control, it is safe to say there is no appliance up to now which has proved to be perfect or absolutely reliable. There is not one of which may be said: “ This I can recommend as entirely satisfactory.” In no single one is it impossible to detect some flaw, some disadvantage.

Lord Dawson himself admits that if “ some existing devices are physically harmless, others are not harmless and a few are harmful.”¹

That there is “ Nothing new under the sun ” would seem to apply to the matter of contraception as to so many other things, for, according to Professor W. E. Lofthouse, there appear to be signs of the knowledge of these means in primitive agricultural societies, as among the Thonga of South Africa, the German tribes before their conversion, the Arabs and the Jews, and among the Greeks and Romans!

¹ Evidence before the Special Committee on Investigations of the National Birth-rate Commission.

Instances are also quoted from ancient Hindu writings.

But until quite modern times contraceptive checks, if known at all, were known to very few, and were not used only for the purpose of keeping down the number of births.

Malthus, at the beginning of the nineteenth century, was probably the first to express alarm at the rapid rate of increase of the "labouring population" when the demands of the new factories, replacing domestic industries, were felt to place a premium on large families. Postponement of marriage and moral restraint as advocated by him seemed then to be the only remedy, and it was some twenty years later that Francis Place suggested, as a substitute for this custom, the use of mechanical means to prevent conception.

When the devices advocated by him were invented we do not know, but it is said that sheaths had been used in Italy as early as the sixteenth century. In latter days the book called "Fruits of Philosophy," by Knowlton, published in 1833, became notorious; later again, another work on the same subject appeared in New York, in 1866, without any unfavourable notice being taken of it. But so far as is known, it was not until 1880 that the popular and widespread awakening occurred with the sudden development of improvements in the invention of Birth Control methods.

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It has been said that the policy of *laissez aller* is an essentially British one, but it may be suggested that if in some respects we are inclined to be conservative—retrograde even—in others we are by far the most progressive community in the world; for instance, the Anglo-Saxon is unquestionably ahead of any sister races in the practice of hygiene, upon which so largely depends the whole welfare of the human being.

It is just because we are thus hygienic that we have hesitated and recoiled from these innovations which, within the past generation or two, have flourished exceedingly on the Continent and elsewhere, but have only taken root in our soil of late years, and with much difficulty.

Even putting aside all ethical and moral considerations, there remained that caution, bred of an inherent sense of hygiene, that would not permit us to accept without reservation these artificial measures of contraception as a Heaven-sent revelation that had come to the world, and ought therefore to be put in use.

Reluctantly, distastefully, the practice was accepted by many, it is true mainly as a *pis aller*, a dismal makeshift, until something better, more satisfactory and more uplifting, be discovered to take its place.

Meanwhile, quick to profit by the hesitations and the helplessness of an awakened people, scores of enterprising commercialists, mostly of alien origin, settled in England from all parts of the Continent.

Small shops sprang up in every town, dealing in certain appliances and drugs, with accompanying explanatory literature, and, in the space of a few years, these thriving businesses have increased by leaps and bounds.

No doubt the strongest argument advanced by the adherents to contraception is that it is here, and that it has come to stay. For this reason alone it has often been pointed out that it is to the interest of all concerned that the practice should be carried out on scientific lines and under qualified medical supervision.

And here we have the whole position in a nutshell. Science is to step in and cause all sex union to be hall-marked with its special brand of treatment. Qualified supervision is to lift or lower the marital act to the level of a slight surgical operation!

If special appliances do not suit every case, certain drugs will be used as a substitute or an addition to the mechanical devices "to make assurance doubly sure."

And supposing these drugs, if harmless, prove to be insufficient to kill an embryonic germ, fresh ones will be found and advocated, guaranteed to destroy the vitality of the sperm cells without damaging the surrounding tissues in which lies harboured the fertilised or unfertilised egg cell.

So inspiring a proposition, if capable of realisation, would doubtless give cause for satisfaction both to its inventors and beneficiaries. But it is precisely at this juncture that we stumble on the fact that *we*

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cannot break Nature without breaking ourselves. In order to destroy a germ that is part of a woman's organism, and in no way an alien body, we are bound to damage the little army of phagocytes surrounding so healthy a product as a normal germ cell. Untimely destruction is dealt with in such a fashion as to leave the locality of its potential fertilisation strewn with the débris, not only of itself, but of hundreds of its valiant defenders, and to this scene of ravage will sweep, in due course, thousands of pathogenic germs, to batten on the results of this disaster.

Inflammation, in a greater or less degree, may be set up by these bacilli long after the irritant drug has been used.

In time, after many such happenings, a chronic state of morbid tissue is formed, a kind of "no-man's-land" whence the phagocytes have fled, and which the evil germs, their enemies, are prone to occupy more and more frequently until they make it uninhabitable to any fresh egg-cell or embryonic germ. So the ovum passes on, from spot to spot, restless, discomforted, and finding no healthy decidua in which to rest, awaiting impregnation; or again, if it be fertilised by any chance, it fails to settle, for lack of suitable soil in which to grow, and slips away and is lost.

This occurring time after time, the potential mother remains childless, long perhaps after she has given up

the use of these death-dealing methods, and has started praying *for the babe that will never come!*

It is a sad truth that the surest methods of contraception often tend to prevent conception in the future.

Young couples marry and decide that they will use certain methods for a term of years, until they are better able to start and rear a family. How many are the cases that I have in my mind's eye, of women whose custom it was to use preventives such as are widely and insistently recommended—women who, apparently for no reason, cannot have the child they now long for.

The husband would not take precautions . . . the wife undertook to shield herself, and now she is left fruitless, barren, broken in body and spirit.

I am absolutely convinced—and it is as a grave and emphatic warning to young couples that I reiterate these words—that after these methods have been in use for three or four years, the power to conceive is only too often completely annulled.

The other day, a clever lady doctor, who, together with her husband, also a medical practitioner, has had enormous experience in a London suburb, expressed herself to me in these words: “I wish you could see as often as we do the disastrous results of quinine pessaries and other appliances which are used by so many poor, ignorant women. The rubber appliances for the most part cannot be made to fit,

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and are therefore worse than useless. As for the pessaries, they cause all sorts of inflammatory troubles and local disabilities that are responsible, I feel sure, for much of the increase in cancerous growths and other uterine disorders which nowadays are so prevalent among women."

A well-known lady doctor wrote to me from Scotland as follows: "I am very glad that you do not recommend contraceptives, for, *like all other doctors*, I see much of the disastrous results of these methods, especially on the nervous system. . . ."

Many are the other doctors who have written to me in the same strain.

If it be true, as some medical authorities assert, that women do absorb something of the ingredients of the seminal fluid and benefit thereby, may it not be equally true that the system likewise absorbs the drug locally applied to prevent conception, and in a corresponding capacity suffers from its ill effects?

Further, may it not be submitted that if we have too high a proportion of modern neurotic women, it may be because they make use largely of preventives harmful to themselves individually; whilst in other countries husbands are more willing to take the precautions themselves, no matter how irksome these prove to be.

In an oral statement Lady Barrett recently said: "Scarcely a week goes by without my seeing patients who earnestly wish they had never used means to

prevent that which they now greatly desire to have."

I can but reiterate this statement from my own experience, which in the matter of numbers is in no way negligible.

Where women have ceased using quinine pessaries and still have no child, one of two things is quite clear ; either they are naturally sterile and have been using these methods quite unnecessarily, so degrading all normal marital relations and burdening themselves with irksome and unnecessary trouble ; or they might have had children, had it not been that these methods have so destroyed their natural fertility that it will take months or even years of treatment to effect a cure, if indeed this is ever possible at all !

Goethe spoke wisely when he said : " Action is easy ; thought is hard." It is so much simpler where a fruitless union is aimed at to rush into action, imitating the foolishness of one's friends and burdening married life with useless or harmful paraphernalia, than to stop and reflect on matters appertaining to health and hygiene.

If women would only think for themselves they would realise that if certain substances can so penetrate the walls of the vagina as to cause sleeplessness, indigestion and local irritation—which many sensitive women admit—such results can only have the most deleterious consequences on the ultimate condition of their internal organs, and on their general health.

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Take quinine for instance : this is never harmless ; it may allay fevers and prove helpful in cases of influenza. It is used very largely to prevent malaria and other disorders so prevalent in hot countries. But if it works potently in one way, it leaves an injurious aftermath in others. It has been contended that during the 1918 influenza scourge almost as many people died of this remedy as of the actual malady. Whilst too timid to concur fully in this assertion, it is difficult to refute the fact that in cases of "heart failure following on influenza" over-strong and repeated doses of quinine were contributory agents of the subsequent fatal heart weakness.

But if quinine has a pernicious effect on the heart, *its action on the womb is deadly*. In order to prove this, let any medical man investigate conditions in Africa, India, or any other intemperate zone, and enquire how many white women living out there have never had a miscarriage, and what is the percentage of *boys born alive* as compared with the number of girl infants reared in those climates.

Here are some extracts of letters received from various parts :

"I long for a son ! but in West Africa, where I have lived for years, parents usually have girls only ; *it is most rare to carry a boy full time*. . . . But, then, everyone is obliged to take five grains of quinine a day ! . . ."

And this from India :

“ Out here we all are obliged to take quinine. . . . I was pregnant, but the drug brought it all away. . . . Later I had another mishap, brought on by quinine. . . . *They were both boys.* I only managed to have *girls*, of which I have three.”

From the Malay States a letter runs :

“ I had a miscarriage, as I was forced to take quinine regularly . . . my heart has been terribly weak ever since, and now I cannot become pregnant, and yet so earnestly desire a child, a boy especially. . . .”

What I am trying to show is that quinine is inimical to an alarming degree to *boy* babies. In the first place, if used locally, it is apt to cause a permanent irritation round the neck of the womb, which may jeopardise each potential male embryo, since these lie nearer the cervix than do the female ova.

Secondly, the drug, taken internally, has a direct action on the uterus, which is far more prone to eject the male embryo than the female, which usually lies embedded in the higher regions of the uterine cavity.

Thirdly, quinine would seem to affect the male foetus more directly through the mother, because the female foetus is more immune to the maternal influence than is the male foetus.

When a woman writes to me, telling me she has taken doses of quinine for many years, my heart sinks within me, so well do I know her tragedy before she unfolds it in her closely-written pages !

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It may be said that, in view of my frank and unmitigated dislike of quinine and all its ways, no matter how it be used, it is only fair to offer some alternative to the luckless female victims of an intemperate clime.

There are certain remedies which are extensively used by American and Continental practitioners which have proved just as efficacious as quinine, without any of that drug's dire results. In my own experience these alternatives have proved extremely satisfactory, both as preventives and cures. They not only allay feverish symptoms, but they increase the patient's vitality, instead of lowering it, as does quinine.

But I would warn all women who live in tropical countries that no drug will shield them from fevers and other disabilities unless they refrain entirely from all kinds of cocktails and other alcoholic beverages, black coffee after meals, strong tea, cigarette smoking, and other such bad habits!

In the space at my disposal I cannot enlarge further on a subject of such vital interest as that of artificial contraception, but when there is an alternative waiting to be offered, one willingly forsakes the outworn shibboleths—the threshed out policy—to seek further afield, to break new ground, and it is in so doing that we light upon the solution that *Nature provides*.

VIII

THE EVOLUTION OF CLOSE TIMES

“ Men must pass from old to new,
From vain to real, from mistake to fact

.
How could man have progression otherwise ? ”

—BROWNING.

IT is a remarkable thing that mankind alone of all living species is perplexed with a Birth Control problem. Whatever the advantages that civilisation may have heaped on us, we cannot say that in our assumption of its blessings we have not lost some of the merits of a more natural state, nor can it be justly maintained that man has gained in reason what he has mislaid in instinct.

Accepting the theory of the evolution of man, we have first to note that the mere animal is safeguarded from undesirable and too frequent output of issue by the “ close time,” or season of immunity granted to each creature according to its kind.

From the mammiferous beasts, such as the mare and the cow, with their monthly, or the bitch with her bi-yearly, “ heat,” we arrive at those who have but one “ rutting ” season, such as the deer and other species of wild life, and on again to the birds, who mate with the coming of each spring time.

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Thus all these female creatures are provided with a perfect immunity from desire or risk of impregnation at all times other than that prescribed for each several species.

And in all of them the plan of evolution is clearly demarcated. Thus we see that Nature has arranged that the lower the species, the less frequent are the "heats," the shorter the gestation, and the greater the output of its issue; witness the rabbit with its proverbial prolificity, the sow with its generous litters, and animals of the rodent species.

Whilst the higher the plane of animal, the more frequent the heats, the longer the gestation, and the less the output of offspring.

So we come to the highest animal of all, Man, and similarly we have to realise that with woman, his mate, the same condition prevails, in that the nearer she approaches the extremity of civilisation the more ovulations she will have, with a correspondingly small degree of fruitfulness, and a further diminution of what will be described later as her "close time," whilst the more simple the standard—or the lower, if we choose to call it so—the less her number of ovulations, and the longer her "close time."

In spite of the influence of climatic conditions on certain peoples, we may still adhere to this as a general rule, with but few exceptions.

For animals, instinct, allied to the physical urge, is all-sufficient in a kingdom where reason and self-

mastery are neither known nor required, but on a higher plane certain changes evolve. As human beings we stand isolated, alone, devoid of many of those strong natural influences which so completely protect the animal species, and, of the two, man and woman, it is she who has departed the farthest from animal nature in the workings and characteristics of her procreative powers.

For whilst man still adhered closely to his pristine responsiveness to the call of his mate, woman was confronted with a gap in the complete scheme of close time which had been vouchsafed to the female in her animal state ; and it was at this juncture when, at certain times and seasons, she could no longer count on an immunity that had been so perfectly arranged for the animal world, that, faced with the alternative of unregulated desire and unbridled procreation, she summoned to her aid the first elemental virtue of humanity—that glorious attribute of self-mastery, which raises mankind above the level of the beast.

It is among certain of the savage species of humanity that we trace the birth of self-control. The new-born virtue is fostered and accompanied by a decrease in the close time, and a corresponding increase of desire as compared to the higher animals occupying the lower rung on the ladder of evolution.

Above them we may cite the class typified by the Mongolian or Slavonic peasant women, who, in pro-

portion to the further diminished duration of their close time, have correspondingly increased desire, which in turn demands and evokes a greater power of self-control.

They again rank below the peasant classes of the Scandinavian, Teutonic and Latin countries, who work harder than their men-folk to draw a substance from the soil. Among them self-control begins to play a prominent part, but their close time is still almost twice as great as those of the women I am writing for—all the normal and healthy women of civilised, up-to-date countries. It is, however, in following on to the extremity of the cycle of civilised life, that we end by touching on that happily small class of modern women, who, in their eagerness to pluck the unripe fruits of civilisation, have overstepped the mark, becoming over-sexed, soft, wrapped round in pampered luxury. These, having failed to preserve the happy medium, which is the border line to all progress, have become deprived of most of the safe-times that they should enjoy. In this respect the one remedy is to recede from such an extreme by falling back on a more healthy mode of living, diet and daily exercise, etc., and thus resume the sufficiency of blank-time, *which Nature has allotted to all normal women.*

Returning once more to the days of primitive woman, we have to realise that she remained unaware of those close times, existent from the beginning, which played such an all-important part in the plan to regularise the output of offspring.

Possibly it was not necessary that she should know of them. The world was still young, vast populations were required to people and till the virgin soil and procreation was at a premium.

But gradually, as in many parts the inhabited areas grew dense, woman slowly but surely awakened, and began to resent the ignorance surrounding her as to Nature's law.

She saw man, at one time torn by desire, at others bereft of natural longing, whilst she, distraught, was casting about in a first attempt to direct her new-found reason, her awakened intelligence, to further the use of that vague and imperfect chart which her blunted intuition had sensed.

She, who had effected the greatest advance in sexual evolution, realised instinctively that in her must lie the power of directing the will and desire of man.

In the development of his self-control, she was quick to detect the one avenue of safety for herself and her offspring. With the narrowing of her close times, she found protection in a self-control that, growing in proportion to its need, in its turn facilitated the advance of man towards domesticity. Thus it was with her full connivance that the laws of marriage and other social semblances of decency were built up in the remote ages of the past. And in our efforts to augment, in a ratio corresponding to that of progress, the scale of self-control, we have succeeded to such

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a degree that it has now become a living quality, a part of our whole daily life, and the very essence of those ethics on which society is based.

That it is, nevertheless, not complete is manifested by the twin spectacles of over-procreation and artificial preventives, which in the past generation or two has presented such perplexing problems and raised the momentous question of Birth Control in its many aspects.

One after another, new diseases, new visitations sweep over the earth, taking toll of millions of lives, scourging and lacerating mankind. Yet the very suffering they leave in their train goads us on to search, ceaselessly and tirelessly, for that which alone can rob them of their destructive power—the antidote of a compassionate Nature.

So it is with the problem of Birth Control, which has added so much anguish to the marital lot. As long as the supreme heights of self-mastery are unconquered, and we are not spiritually whole, so long will this suffering and anguish remain ; unless, throwing aside the mechanical contrivances and other artificial preventives, we rise to a proper use of that close time that Nature has vouchsafed to woman—a close time sufficient to allow the gratification of human desire, sufficient to avoid superfluous procreation, and yet, by its very restrictions, sufficient to foster and stimulate to an ever-increasing degree, the divine quality of self-control.

IX

NATURE'S WAY

“ For things far off we toil, while many a good
Not sought, because too near, is never gained.”

—WORDSWORTH.

IF it be true that we are never tempted beyond endurance or tried beyond our strength, then it must be an equal truth that there can be no chronic evil, with which we may be afflicted, that has not its panacea—if not its cure—close at hand. To us it remains, not only to seek for it, but having found it, to possess enough wisdom to recognise it as such, before fruitlessly pursuing further quest.

When a dog requires medicine, he will sniff among the grasses till he finds the special herb that will help his ailment ; but where animal instinct may fail us, our brain should be capable of sufficient reason to discover the remedies necessary to alleviate those ills to which human flesh is heir ; and when our reason is inefficient, we have no right to blame civilisation for having blunted our instinct of self-preservation, for there is nothing to show that the primitive and uneducated peoples are any more endowed than we are in this respect.

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An Egyptian mother will watch with inertia born of supreme ignorance the vermin festering round the inflamed eye-lids of the babe upon her knee.

Hindu and Brahmin parents still force their girls into wedlock in their early teens, and the birth and death—all in a year—of the many sickly infants of these precocious marriages are viewed with complete equanimity by their elders.

“The earth must have her share,” is the laconic utterance of the Roumanian peasant woman as she sees her babies laid to rest in their last earthly abode, and philosophically she is content to rear but half the children she may bear.

And so it is all over the world where instinct is blunted or dead, and reason all undeveloped and scant.

But we who are different, who have studied and thought, who have striven arduously to probe the many seeming mysteries of Nature and her works, it is not for us to accept life's evils with any such complacency. “In the right hand of Wisdom is long life,” and on what does “long life” depend if not on a common sense mode of living, free from vices big and small, and on a wise obedience to Nature's laws, which we should seek to understand and interpret more fully day by day.

It is such knowledge that allows us to know how to have children at will, how to beget healthy offspring—boy or girl—at choice, and above all, to know how,

if for reasons of health and happiness, they be unwanted, undesired, they will remain unborn, the potential germ untouched, the source of its being unpolluted, the fountain-head of its potentiality undisturbed and undefiled.

Those who have read and studied my previous work, "Sex at Choice," in which are very clearly elaborated the times for the conception of boys at one period of the lunar month, and girls at the other, will have readily understood that Pre-determination of Sex is neither difficult nor in any way complicated to understand.

Similarly my readers, after carefully perusing the previous chapters of this volume relating to the ovaries and those times propitious to conception, must have thoroughly realised that in between these two epochs there is a complete lull in the activities of those organs.

The boy time is over and done with ; the girl time is not due until eight days before the next oncoming period. There are, therefore, five, six or even seven days when no conception can take place, when there is a quiescence of all possible impregnation.

That full use may be made of those days with complete immunity, *by all normal women*, I shall seek to prove in a subsequent chapter.

But there are people who will say: "What! Barely a week, a few days merely out of the twenty-eight, free from the terrors of a possible pregnancy!

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Is it worth the while to lend ourselves to these considerations for such a short time of immunity ? ”

To these readers I would say : “ Wait ! Read on and see what I have yet to tell you, and then judge whether some small degree of self-control, some slight reckoning, are not worth while to all decent folk, to all, in fact, who would maintain their married life on a higher standard, on orderly lines, rather than let it descend to the level of sanctified licence run riot ! ”

Then, with confidence in their understanding and patient attention, I shall proceed to point out what may have escaped the notice of thousands of those who have heard or read of my theories on Sex Determination.

If male and female offspring can be conceived within the space of one month only, and if both boy and girl are conceived within the four weeks between the two periods, the month following on that of the left ovary's ovulation and subsequent menstrual flow *is void and clear of all possible fertilisation*. Thus there exists a full three weeks when the procreative organs lie dormant—if one excludes the seven days of period—*during which there is no possibility of any normal woman conceiving a child, either male or female*.

In every eight weeks, therefore, if we put aside the two weeks for the courses, there remain *four whole weeks of complete immunity*—void, blank, and of absolute freedom from all possible impregnation.

The full details of this must be left for a subsequent chapter, but I would emphasise that therein lies Nature's kindly and efficient way, one wholly compatible with morality and all modesty, one that overcomes every difficulty that besets the vexed question of contraception.

Most thinking people are aware that there is nothing new in the artificial form of Birth Control. Regarding its *natural* form, I claim for it, to begin with, the respectable sponsorship and authority of no less a personage than Moses, whose method of physical and moral discipline, as expressed by the law of the Talmud, contained the first attempt to limit families by some kind of natural means to the sex and size desirable.

But never before in the history of Woman has the existence of a whole *fruitless month*, alternating with the *fruitful month*, been advanced or even dreamt of.

It is, therefore, in all humility that I claim to be the first to lay before women the benefit of this great truth.

Since there is no rose without its thorn, we have learnt to face the contingent of some drawback to every fresh scheme as it presents itself.

This may be no exception but for the minuteness of its exaction, giving its benefits, as it does, in exchange for a very minimum of self-mastery and control of thought, in the choice of days suitable for the consummation of marital relations.

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Is it too much to ask of civilised peoples of the twentieth century, that they order their lives in this respect in the same degree of moderation as they are content to do in all other matters concerning their well being ?

Life is one long struggle between the warring forces of excess and moderation ; the one death-dealing, the other life-giving. It is the quality of self-restraint that has raised man above the animal level. As allied functions, such as eating, drinking, exercise, etc., are all beneficial when used in moderation, and charged with dangers if indulged in to excess, so would I maintain the desirability of an equivalent need of this salutary self-discipline in the sphere of sex-union.

Is such a demand more onerous than that required of couples who proceed on the lines of artificial contraception ; who live in the petty thralldom of sordid and mechanical methods such as put modesty to shame and soil the romance of all married lovers ?

What of those couples of slender means—let alone the very poor ? Are they content to tax their pleasure in each other's love and union to the extent of so many shillings or coppers, or to plane down their raptures to the level of a mechanical appliance, which, to be really effectual, may require specific adjustment or interference ?

Is this the conjugal felicity that Nature, in her great

scheme of physical love and sanctified union, mapped out for human beings ? I think not. And if, by any work or thought of mine, I may be enabled to help to sweep away artificial devices and machinations against which the higher instincts surely revolt, I shall feel that I have not worked in vain !

My ardent hope is that this discovery, resulting so directly and simply from my researches in the domain of sex-causation, may ultimately restore to marriage its purity, its holiness, and secure the abandonment of devices which the Anglo-Saxon has been the last to assimilate, so repugnant are they to his innate sense of delicacy, so alien to his whole nature.

For this reason it is right that he should be the first to reap the benefit of Nature's balm for the sores of modern marriage, the first to pluck the dock leaf that can always be found, if searched for, lying close to the stinging nettle of life.

X

THE BLANK WEEK

“ All truth is precious, if not all divine.”—COWPER.

IT has already been pointed out that between the two periods there are a few days during which the organs are quiescent and there exists an absolute immunity from offspring.

Given that the menses be regular, and counting from the first day after the period, this “ close time,” which for the lack of a better name, we term the “ Blank Week,” dates from the fifteenth day to the twenty-first day counting from the first day of period, and relations may then take place without the remotest possibility of a resultant pregnancy.

Here is the first part of Nature’s great plan to lighten the burden of those wives who are torn between the natural desires of connubiality and the dread of unwanted offspring.

That the correctness of all theories can only be proved to the individual by the laborious process of verification, and to the world at large by the verification plus publication of the verificatory evidence, is a fact I have never overlooked or attempted to deny.

But were I to put half the data at my disposal into a volume of this kind, not only would it be too bulky to fit into any lady's bookshelf, but it would be too monotonous and dull to interest the majority of my women readers, with whom, chiefly, I am concerned.

Nevertheless, I will endeavour to state the case for the blank week, and to examine some of its aspects.

It was a generation ago that I realised how, since women conceived *male* issue after their period and *female* before the oncoming one, there had to be a respite, a kind of blank time in between the activities of one ovary and the other. That, in fact, the male ova being capable of fertilisation for a few days only, there must be a lapse of a week before the female ovum is ready to be ejected by the alternating left ovary into the sphere of possible conception in a fruitful month.

The female germ is never fertilised before the eighth day preceeding a period.

Only once have I had this fact seriously questioned, and that was quite recently, when a lady wrote to me saying that she was positive that her little girl was conceived on the fifteenth day of her lunar month.

On looking into the case, I found, as I had supposed, that she enjoyed no blank week, being one of those luckless persons who menstruate every three weeks, and sometimes more frequently still. Thus the fifteenth day was exactly seven days before her period was due.

This condition is of course abnormal, and one which should certainly be looked into and remedied.

All through the centuries there has been an inkling of the existence of some sort of "close time." As I have already hinted, the first use of a "blank time," known commonly to every reader, was ordained by Moses, when he established the regulations under which the Israelites ordered their lives. This was to meet the arduous peregrinating conditions under which the Jews were then struggling, and it is still recognised as constituting the essence of hygiene and sanitary methods.

By the restriction of the use of the first and second week of period, the Jews were debarred from :

1. The opportunities for too large an increase of family.

2. The undesirable results of conception fringing the finish of period.

3. All likelihood of the abnormal activities of the left ovary, which result in girls conceived immediately after the period in a fruitless month, leading to a superabundance of the unwanted female issue.

We know that, as a result of this law, girls in plenteous sufficiency were born to the Jews, though, as was indeed aimed at, in a lesser number than that of boys.

But seeing the strict observance of Moses' inspired ruling prevented any intercourse two weeks from the first day of period, the fact remains clear that their

daughters were, without exception, conceived *before* the oncoming period.

We know also that this first recorded attempt at limitation by natural means was so successful that it was not until the prosperous land of Canaan was conquered that, the ordinance being no longer so rigorously observed, the population began to increase by leaps and bounds.

Many medical men, while lacking the courage to assert that the third week was the "blank" one, have at least maintained that it is extremely infertile.

In the course of an oral statement before the Committee of the National Council of Public Morals, Lady Barrett pointed out how, during the war, Seigel had observed the dates of conception of a long series of children born; he did not find a single child that had been conceived in the third week.¹

In the past twenty-five years, I have expounded my theory of sex-determination to many doctors. Although some may not have accepted this in its entirety, they have invariably acquiesced in the proposition of the "blank" week.

In how many cases has their answer been: "I never thought much about the matter, but now you put it to me, I certainly agree that there must be such a time; and this would account for so much I had noticed before."

Some twenty-five years ago I happened to discuss

¹ *The Ethics of Birth Control*, 90.

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with the doctor attending me the case of a woman who menstruated every six weeks, and having suggested that she would probably have a blank time extending to three weeks, he entirely agreed with me in this surmise, and together we decided to gather all such data as we could in order to substantiate it. A year later he told me that he was more than satisfied that I was correct, whilst other evidence that I had collected also supported my conviction that for people enjoying a regularity of "late" periods, there is a much longer blank time than for women who menstruate every four weeks.

I am told that in Germany the thirty days of a calendar month are accepted as the proper time between the courses, and certainly what experience I have of Teutonic women coincides with this statement.

In Russia the appearance of courses but three or four times yearly is quite usual among the peasantry, and it would seem that the Norman and Breton women of that class frequently menstruate but six or eight times a year.

In such cases the "close time" is prolonged from the fifteenth day of the lunar month until the two or three months have elapsed, namely, right up till within eight days of the oncoming period.

Among the Esquimaux it appears that the "Blank Week" becomes a blank time of ten or eleven months' duration, as it is a rare thing for those women to menstruate more frequently than once in twelve

months, and that usually in the month of August. The result is that winter-breeding is virtually arrested.¹ Such a state of affairs in our country would simplify the problem of Birth Control to an immeasurable degree.

Where there exists a condition of amenorrhœa, or comparative absence of courses, it is naturally all "Blank Week," except immediately preceding or following on the period, which, when it does occur, comes as a rare event.

I know of three women having had children who had frequently spent some two or three years without menstruating. When they have conceived, in each case, it was just before or just after the belated period.

This is very nearly a conclusive proof that, although menstruation cannot exist without ovulation, ovulation cannot occur except before an imminent, or after a receding, menstruation.

Yet one may meet with such cases of amenorrhœa in women who, feeling unable to face a possible pregnancy, are actually employing artificial preventives quite needlessly to ensure against the advent of a most improbable infant.

In these instances all apprehension should be overcome, for, supposing a child were conceived, it would most probably work a miracle in the health of its mother by regularising her, and strengthening her whole system.

¹ Alban Doran : *Trans. Obstetrical Society*, vol. xl. (1898) p. 166. See also *Diseases of Women*, by Dr. E. J. Tilt, p. 132.

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I know quite a number of women who have invariably enjoyed a blank time of three or four weeks, as they are regular to the day at the sixth or seventh weeks.

A concierge in Paris gave birth to nine boys ; she had never had a period more than six times yearly, and only lasting one day at that.

Two serving maids, employed by friends in Paris, with whom I was staying, never had but one day of menstruation, about every two or three months.

These girls after marriage gave birth to sons only. One of them told me fairly recently that she had but two sons, and by being "careful" after each period for two weeks she succeeded in avoiding all further issue.

From Streatham a lady wrote me lately as follows :
" After the seventh day from the cessation of menses I have always had a Blank Time, extending till after the close of the next period. Married fourteen years I have had seven sons, though in each case I longed for a daughter."

I asked this lady to come and see me, and found that from early girlhood she had suffered pains in the left ovary which had evidently disabled her in so far as girl issue was concerned. She told me also that she generally menstruated every five or six weeks only.

In some families the secret of the blank week has been handed down from a former generation.

A lady who had three children told me that she never used any time but the week between the fourteenth and twenty-first day of her lunar month, and had always felt "safe." Her children had been born within the first four years of her marriage, and her mother, in warning her against too large a family, had suggested a trial of the "blank" days that she had, in her own case, found satisfactory.

Many years ago I spent some time with an old German lady, gifted with an extraordinary insight into all matters appertaining to physiology. This she inherited from her father, who had incidentally been medical adviser to the Bavarian Court. In discussing certain matters with me, as she frequently would, she told me that her mother had six children, and would have had many more except for the fact that her husband and she were convinced that there was a "Blank Time" between the fifteenth and twenty-first day of the lunar month. Having made use of this time, she had never been mistaken as to its immunity from conception.

Her daughter in her turn made use of this knowledge and had but two children, according to her desire.

As I have said already, there are a great number of women using preventives who are in possession of but one working ovary. To these women, who possibly have had an ovary removed or suffer from some disorder of one side or the other, there is a complete immunity from offspring for a further seven days.

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For instance, where a woman has suffered acute peritonitis on the left side, possibly following on a girl confinement, she will be entirely immune from conception as from the sixteenth day of the lunar month right on to the oncoming period. The wife, on the other hand, who has no vitality in the right ovary will be equally immune from the ninth day of the period right till the twentieth day of the lunar month.

The average life of an ovum is of ten to twelve days, rarely fourteen days.

Therefore, counting nine days from the third day of discharge when the ovum is first ejected, this brings one up to the *twelfth* day, which is the most likely for conception.

When a male ovum is specially vital it will live on to the seventeenth day of the lunar month. I have known a conception occurring on that day, but in this instance the left ovary had been removed, and the blank week extended invariably to three or four weeks, the periods being always "late."

Since the publication of my book, "Sex at Choice," no denial of the existence of the blank week has reached my ears. The chief protagonists of artificial birth control do not, to my knowledge, dispute its existence, nor have they been successful in announcing the discovery of any drawback or flaw in this, Nature's perfect instrument of Birth Control.

The argument might be advanced, however, that

it is never absolutely safe to depend on the blank week, as the male sperm can live for eight to ten days, and supposing it to have lain concealed in some crevice in the lining of the vaginal canal, it may emerge and enter the womb when the time is due for an ovum to appear.

I have yet to obtain any evidence of such a probability, and I do not concur in the belief that this is possible. In the first place, the characteristic of the vaginal passage is to expel any foreign substance; if this does not happen within a few hours, the contraction caused by the effort at defæcation and micturition from the adjoining channels is sufficient to clear the vagina of any alien body by its natural outward current.

Then, also, it must be borne in mind that there is, in the quiescent time, no attractivity to help the sperm cell to ascend, no compelling cilia at work to propel the sperm cell and the egg cell towards each other. There is a smooth and utter passivity of the membranes, due to freedom from all imminence of ovulation or menstruation. Thus the spermatozoon is unwanted and ineffectual, and as such slips away at the first opportunity.

On the other hand, so powerful is the inducement towards impregnation during the propitious days, that it actually happens that it may take place from the outer organs of a virgin girl.

I have been intimately acquainted with two young

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girls who conceived without ever having any kind of complete union, and without a suspicion of desire even. In both cases, although there was distinct aversion, if not antagonism, the indirect and incomplete contact was sufficient to cause the conception of a child; they were certified to be *vagina intacta* before the birth of the child.

Such occurrences could only fall on the most propitious day of the month for male or female issue.

In these instances the "cilia" would have propelled the egg cell below the orifice of the vagina, and attracted to it the sperm cell from the outer organs.

Another argument put forward against the use of the blank week is that sexual desire is absent at that time. In reply to such a statement I would point out that there are women who, having had all their procreative organs removed, have been just as capable of experiencing the full satisfaction of union as before they were operated on—for some time at any rate—and to the same degree as any woman in an ordinary state of health.

Similarly, although many a wife may bear children without desire, yet a sterile woman may in no way suffer from a lack of responsiveness, any more than a pregnant wife, who may yet respond, although at the time she is incapable of a fresh impregnation.

In these cases there can be no question of "periodicity of recurrences of desires," except from purely suggestive influences, and yet it would be difficult

to obtain evidence of any ill-effects in the case of the subjects above mentioned. Surely, then, it cannot be seriously maintained that there are grounds for supposing that intercourse during the blank week is undesirable or less beneficial from the wife's point of view.

Supposing, however, that for the sake of discussion, these and similar objections, which cannot be reasonably entertained, were persistently advanced, could it not still be confidently asserted that they were infinitesimal as compared with those attendant on artificial measures.

The subject has to choose between making use of admittedly repellent contrivances or of the opportunity presented by the operation of the natural law I am seeking to unfold.

XI

THE FRUITLESS MONTH

“ God’s gift was that man should conceive of Truth,
And yearn to gain it. . . .”—BROWNING.

SINCE I have endeavoured to demonstrate how simple it is to make full use of the blank week, it is still more important that I should try and lay before my readers a plan which will enable them to take full advantage of *the greater close* time contained within the fruitless month.

Once it has been realised that in the one lunar month both ovaries have operated—the right for male issue, the left for female—it is a very simple matter to arrive at the deduction that both ova being thus spent, the whole ensuing month must of necessity be fruitless, and void of all possible impregnations.

The fruitless month begins then after the cessation of the left ovary’s period and lasts all through the ensuing three weeks or more, until the next right male period has started. During the latter, the earliest day known for a possible male conception is the third.¹

Although from the first days of the investigation

¹ See Diagrams, p. 155.

which resulted in this discovery I realised that this blank month had to exist, and did exist, it has taken several years to collect the evidence that I felt necessary in order to convince others, and to justify me in feeling able to state with absolute conviction that every alternate lunar month is void and safe from all possibility of conception for every normal woman.

The question has often been put to me : " What constitutes the sexual normality of the average woman ? "

To this I would reply :

1. The regularity of menses, in that they are never more frequent than every twenty-eight days.

2. A healthy state of both ovaries, resulting in more or less equality of activity in each.

If women menstruate every thirty days only, or even less frequently, they are still normal ; but if they are apt to be one or two days early, there is slight abnormality.

The " early " or profuse period is almost invariably the result of some weakness in the right ovary, and to women suffering from such a disability the advent of girl issue is more than probable. In these instances the left ovary becomes more active and its ova seem endowed with extra functional vitality, enabling them to live the full twelve to fourteen days from the seventh day before the period, on through its course and right up to the seventh day of menstruation.

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In some cases, where the ovum is thrown into the uterus but two days before the actual flow, it may live on till the ninth and tenth day of that left period. This is exceedingly rare, however, and I have only known a few such cases, and in each of them there was acute disability of the right ovary and incapacity for male issue.

Thus it is that where there is an abnormality of this kind a girl child may be conceived in what, with a normal woman, is a completely fruitless month.

Such an impregnation results from an ovum which, if unfertilised, should have been carried off by the supervening discharge on the eighth day of its existence ; but the excessive adhesiveness of such a vitality causes this freak ovum to adhere to the tube or to the walls of the uterus, and, if it be high up and the flow not too profuse, it may well survive to the seventh and eighth days from the beginning of this period, days which, I repeat, should be, and *are* in the great majority of women, entirely void, being part of the alternate fruitless month.

Where this happens the male ovum would be weakly and devoid of adhesiveness, slipping away almost as soon as it be set free (in the uterus) leaving three or four extra blank days from the thirteenth day of the period.

It may, then, be asserted that, for a woman endowed with a virile right ovary, and a correspondingly healthy though less active left ovary, where the

courses will recur only every thirty or thirty-one days, there exists unquestionably :

1. A full blank week, lasting from the seventeenth to the twenty-third day of the month.

2. A full four weeks after the following period, if we include the three or four days that this may happen to last.

On the other hand, for the ordinary woman, endowed with a healthy left organ and an equally normal right, who goes the correct twenty-eight days, there is allotted a whole blank week, lasting from the fourteenth to the twenty-first of the period only, if she wishes to remain on the safe side.

But to her who scarcely goes the three weeks there will be *no blank week*, and barely eleven days of immunity in the ensuing month ; in her case the freak ovum may be present until the ninth or tenth day of the would-be fruitless month.

That is precisely why such a condition needs drastic overhaul and treatment, because it is abnormal, wearing, and debilitating, and is capable of being remedied.

These women are invariably "soft," oversexed, and flabby, or inclined to stoutness and nerves.

Above all, if they desire male offspring, too often they are disappointed, and bring forth females only, or become sterile at an early age.

In a later chapter I shall deal with the measures that may be required to meet such conditions, where

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limitation of issue is desirable, and where there exists that lack of immunity that might be necessary in special cases.

Sometimes there is difficulty in ascertaining the identity of the fruitless month, though this is more rare than one might suppose. To those of my readers who experience such difficulty, I would lay before them the three distinct ways by which the alternate months, fruitless and fruitful, may be recognised.

1. The left ovary in the young girl is the first to develop and the first to menstruate; therefore, provided these periods were kept count of and the calendar preserved, as is frequently the case, it is a matter of mere reckoning back to ascertain the month arrived at. In instances where the courses began late, and marriage was early, this should be a simple matter.

2. Before each period certain signs and symptoms are manifested, though of a different nature and to a varied degree in each individual. These may be observed either slightly before or during menstruation. Sometimes they may be noticeable a full week before the period is due; a slight headache is felt; pains are experienced in the groin, the leg or the breast, but always on the side corresponding to the ovary in activity.

Some women are often distressed by small spots or pimples appearing on the tell-tale side of the face,

forehead, or throat; or they experience a slight nose bleeding from the nostril, right or left, according to the period, male or female.

Others have noticed the discharge of "small lumps" every other month, or that the flow is of a more "clotty" nature in the fruitful month than the fruitless. Above all, where there is any marked weakness in one side this will be emphasised at every other "monthly." For instance, a weak eye, a troublesome ear drum, a rheumatic shoulder or leg will make itself doubly felt at those times.

Again, where the appendix has been removed or adhesions have formed, according to the side, there will be a dull ache, a slight reminder!

3. When a woman has borne a child or had a miscarriage of an identified sex, there is no further hint of a difficulty in making sure of the alternate month for the vast majority of women.

The correct day to count is from the first period, following on the birth of a child.

If it be a boy, the next period will be female from the left ovary, and followed by a fruitless month in which no impregnation can occur. If the confinement be that of a girl, the following period will be male from the right ovary, and the ensuing weeks will be fruitful for the conception of both boy and girl offspring.

There must, of course, be a clear understanding of the difference between the ordinary "cleansing," or

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lochia, and a possible period, starting at the fourth week after parturition.

Any confusion would arise from a sudden excess of the ordinary discharge of child-bed, which is of rare occurrence where the case is proceeding on normal lines. When a mother suckles her infant, there should be a gradual lessening of the lochia, so that by the third week it be almost entirely dried up.

With male issue this is the proper and normal occurrence, although after a girl baby a very slight "flow" may drag on till the fourth or fifth week, especially where the confinement has been arduous or complicated. It is in these instances that I would warn mothers to make certain as to the actual date of the real period after confinement, and not to mistake it for what I have outlined above.

Bearing in mind the fact that it is an unnatural phenomenon to suffer monthly loss, or to become pregnant whilst suckling, it is not difficult to keep account of the few periods occurring between confinements, if they be not too greatly spaced.

Sometimes there is a lapse, also, of a few months after weaning before the menses re-assert themselves; and where such respite is generous, the mother benefits accordingly, in that there will be a complete recovery after confinement, and that during and after the suckling there will be no loss of strength, but rather an accession of well-being and energy; and, as the periods renew their monthly appearance,

they will be more on the "late" than the "early" side.

Having tabulated the three different methods by which the alternate months may be recognised, it behoves me to cite a few instances in explanation. On turning back to the first proposition dealing with early menses of young girls, I would quote the following :

A young girl friend of mine, who never menstruated till she was seventeen, had but four periods before she married at the age of nineteen. After the fourth period, she conceived before the on-coming female period, this resulting in a baby girl.

Another young woman had, to my knowledge, but two periods up to the age of twenty, when she married. Some time later she gave birth to a little girl, although she had not menstruated for eighteen months before she conceived. Since then she has had no return of her periods, although the baby, weaned at six months, is now a year old.

A case of mine was able to detect her fruitless month from girlhood upwards by marked symptoms of pain in the left eye at every alternate month. When she married she was able to secure to the full the immunity at her disposal, whilst rejoicing in the birth of the three children of her desire.

As relating to the recognition of the free month by local signs, it is of interest to note that a lady, who is much concerned with subjects connected with

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women's hygiene, after reading my last book "Sex at Choice," took the trouble to enquire of all her many friends and acquaintances if and how they were able to detect the advent of the fruitless month. They emphatically declared that they could tell in various ways; some by tenderness in one breast or the other; others by a slight pain in the groin, according to any weakness of the ovary on that side; where there had been a severe miscarriage or complicated confinement, the pain was unmistakably denoted on the side relating to the sex of the foetus or infant which had caused the trouble.

Such testimony I have in plenty. A Mrs. A. writes: "I am always made aware which is my fruitless month, ever since my baby girl was born, by discomfort in the left side at every alternate month."

A Scotch woman, who came to see me recently, told me that every other month her right side ached terribly. This had been the case ever since her boy was born, some years ago.

As regards the choosing of the fruitless month after a confinement, the very simplicity and the numbers of the instances that one could quote to prove the fact of alternate fruitlessness would render wearisome a too elaborate discussion of the subject.

Nevertheless, I would mention a few cases to make my meaning doubly clear:

1. A lady, having had three little girls, and having made a quick recovery in each case, nursed the last

born for six months. Four months later she had her first period after her confinement. On the tenth day she conceived, and nine months later, gave birth to a boy. She nursed him eight months ; thus she had but one period in the course of three years. From that time on it has been a simple matter for her to ensure against unwanted issue.

2. A woman gave birth to a girl, whom she was unable to suckle. At four weeks her next (male) period arrived, and immediately after this she conceived a boy, whom she carried barely nine months. Thus she had two confinements in ten months. After this she was careful to avoid further offspring by using the fruitless month, counting from the next period, which did not arrive until she had weaned her little son.

3. A farmer's wife, being unable to suckle her first son, born on January 1, had a (female) period at the month, during which she remained immune.

At eight weeks she had a second (male) period, after which she conceived again, it being the fruitful month, and another boy was born on December 3 of that same year.

4. A young woman, having given birth to a son, decided she was not strong enough to nurse him. Hardly was she up and about, however, than, ignorant that it was a fruitful month, she again conceived, just before the first on-coming female period. The poor woman was wretchedly ill all the time of gestation,

and gave birth to a puny girl before her first baby was nine months old.

It was when first the full meaning of my theory of Sex Determination burst upon me that I came to realise the actuality of this alternate fruitless month, and ever since then I have never had any doubt as to its existence.

I perceived, also, what every thinking person must see, that this alone can explain certain facts and problems that have puzzled biologists from the beginning.

It explained, for instance, why intercourse after the period in *one* month so frequently does not result in conception, although all conditions appear favourable; whilst on the self-same day on the following month, impregnation often occurs under conditions apparently far less propitious.

It explains how, in polygamous countries, men living with many wives may fail to produce more offspring than the monogamous father whose whole attention is claimed by his wife; and, reinforced by the blank week, it renders adequate the explanation why so many couples are mated for months and years before they happen to hit on the right day on which to conceive.

Fortified by my long observation, I was able to collect a quantity of corroborative evidence during the Great War, which, producing marriages lasting only a week or a day, frequently left the bride, in this short space, the pregnant mother of an orphaned

and unwanted babe ; whilst it witnessed so many sorrowful unions of a full four or five weeks' duration, when the much-desired heir was not forthcoming to cheer the war-widow's desolate heart.

In the first instance, was it not a propitious day that all unwittingly was hit upon ? In the second, was it not the utter voidness of the long blank month that rendered fruitless the mating of that luckless couple ?

It is indeed evident that were it not for this alternate fruitlessness, the fatherless children of the world would be increased twofold ; and, had it not been that wives can conceive but for *two weeks or so in every two lunar months*, the burdens we now have to carry would be more, perhaps, than our shoulders could bear.

Here are one or two further instances of the workings of the fruitful and fruitless times :

1. A married woman, who had had two children by her husband, did not conceive when he returned on leave for four weeks, although she was not averse to a third conception. The day he went to the Front she had a period ; and ten days later a soldier lodging in the house took advantage of her, with the result that conception did occur. The husband was killed, and the woman soon after married the father of the son to whom she had given birth.

2. A shop girl married a soldier during the war. They spent a month together, and, no pregnancy occurring, when he returned to the Front, she resumed

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her work. Later, he obtained two days' leave. Although feeling convinced that, as before, she probably would not conceive, she nevertheless was more careful than she had been, and on one day only could conception have occurred—as it actually did—the eleventh day after the first day of her period. Reckoning back, I found it was just seven periods after the fruitless month of her honeymoon.

I have collected so many interesting cases that only the fear of taxing my readers' patience prevents my giving further examples.

Since the publication of "Sex at Choice," where I first touched on the fruitless month, I have received quantities of valuable evidence from my women readers, who have presented me with further confirmation of its existence.

In only one instance did a woman write to me denying that her experience tallied with my facts. I made a point of going deeply into her case, showing conclusively, to her satisfaction, that her dates were mistaken.

We have touched on the evolution of woman; but the fact of her fundamental transformation has never been so clearly pointed out as it may be now.

For when we view the metamorphosis of her procreative system from that of her animal ancestors, we realise that it would only have been brought about by the gradual process of her human mode of living, from the earliest days of her destiny.

As the wants of man increased with his awakening intelligence, so his labour became more onerous, and both he and his mate had to work with their arms ; and as civilisation decreed that the right arm was the most effectual, so were the first tools fitted for his use.

Thus, with those few exceptions, where the left may be more in use, human beings became increasingly right-handed, and woman's whole right side grew correspondingly muscular and developed.

Long centuries of hard work have produced in her the idiosyncrasy that renders her unique : that of the more developed right ovary, *the greater natural preponderance of male issue*,¹ and an action of the right ovary distinct from that of the left. So it is that we have the phenomenon of that left organ operating before the on-coming period in the fruitful month, leaving the following alternate month blank and fruitless.

When they study these pages my readers will have gathered just how much blank time they may enjoy ; if they have more than their share, let them be thankful ; if they have less, they will know that it is for them to remedy such a disability.

The only condition attached to the use of this prerogative granted to woman to limit her offspring

¹ In "Sex at Choice" I have explained how, in spite of the above, there is still a superfluity of women, due to the preponderance of male miscarriages and the male infant death rate. Also, see the passage on miscarriages, pp. 38, etc.

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at choice is that *she should know herself* ; and, in the space of a short time, my hope is that all women will have become so exercised in their newly-acquired wisdom as to recognise the rightness and the leftness of each alternating ovary as easily as they do the distinction between their right and left nostrils, their two eyes, and the two sides of their face !

XII

THE ABNORMAL WOMAN

“Ends accomplished turn to means.”—BROWNING.

THE numbers of women who have the misfortune of experiencing the return of their courses every three weeks is probably greater in the Anglo-Saxon race than any other. Whether the cause be climatic or temperamental is debatable ; but there are no two opinions as to the inconvenience and disadvantages of such a state.

Devoid of any blank time in the fruitful month, they have but a few days in the next—what should be—fruitless one, crippled as they are by the possibility of a freak ovary.

If they but knew it, there is good likelihood of immunity from impregnation for the seven days after the period of the fruitful month, on account of an inherent inactivity of the right ovary which corresponds with such a condition.

But where any doubts may arise as to this issue, where conception is undesirable in a high degree, then with all confidence I would recommend a simple measure, entirely harmless and cleansing, and one which may be used with far more assurance than any

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of those other preventive measures of a much more questionable character.

Some thirty years ago the medical faculty in the United States was emphatic in recommending the hot douche for various conditions of wifehood.

They suggested it :

1. In cases of sterility, when syringing with hot water with common salt added, was thought to be helpful towards inducing impregnation, before intercourse took place after the period.

2. When convalescing after confinement, to help to effect cleansing and healing of the parts involved.

3. To avoid offspring, either immediately after or within eight to ten hours of marital relations.

For sterility douching has been found very helpful in many cases, but its use after confinement, except where some infection was present, or there were other complications, does not commend itself. Where nature has been allowed to take its course, and no chloroform or other drugs have been resorted to—the use of which, except in very special instances, are deeply to be deplored—the healing is best left to take its own way without any undue interference.

Where, however, douching can be recommended is in those cases which I have described, where a woman, not quite normal in her menses, desires to avoid offspring. So simple a method, with so hygienic and cleanly an effect, can evoke but little and far-fetched criticism.

The fact of its being a cheap method, and one easily provided for by the ordinary syringe (with the adjunct of a vaginal nozzle, an article obtainable at any chemist's), which every household may possess, should allow of no excuse being made as to the complications or costliness of such a proposition ; indeed, no other method, discovered up to now, is so moderate of cost, so hygienic, simple and harmless.

For some reasons the douche, as recommended, has failed to receive in certain quarters that measure of instructed approval which its innocuousness and efficacy deserve. It is true that there is no profit to be made by the exploitation of an article so simple and inexpensive.

For instance, it has been put forward that the douche may cause much inconvenience by having to be resorted to in the middle of the night, when hot water is well-nigh unprocurable.

To this I would point out that it is not in any way necessary for the douche to be taken immediately ; a delay of a few hours is not a deterrent to the annulling effects of a hot douche taken on rising. In any case, hot water can be quickly obtained by means of a small spirit lamp.

The sterilising and cleanly action of Condyl's Fluid or mere kitchen salt in the water has no injurious effect on the mucous ; and the warmth and refreshing nature of such a cleansing has only to be experienced to be appreciated.

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At the same time, this is but a makeshift—the most harmless artificial measure known—and I reiterate that people should not be content with what I can only recommend in cases of urgency. All those women who are deprived of a natural immunity should seek advice, adopt a more healthy way of living, take every measure likely to prove helpful, until the menses recede to a normal occurrence, and they are enabled to make full use of Nature's scheme of close time.

Against this law of Nature, the only objection that has been levelled is to the effect that the very people who need it most are the least likely to avail themselves thereof. For instance, how can it be expected of the weak-minded, or those slightly deficient in sane mentality, that they keep a reckoning of the days or weeks that are immune against undesirable fertility? But such an objection must stand in exactly the same light with regard to artificial measures; and that is where lies our utter impotency regarding the mentally deficient, or those feeble and worthless members of society devoid of self-control.

Sooner or later the force of necessity will compel us to take the bull by the horns and to consider seriously the proposition so often put forward by biologists and medical thinkers—the legalised sterilisation of the hopelessly diseased and mentally deficient.

Measures have been tried in certain countries with great success in cases of recurrent madness, where the

patients are able to be at large periodically, until the next attack drives them back to the asylum.

Indeed, there is much to be said in favour of such a treatment, when one takes count of the procreative mischief that madmen are allowed to perpetrate during their respites of "sanity."

I know of a poor woman in Yorkshire who has seven children, the last three having been conceived during the spasmodic returns of her demented spouse from the lunatic asylum! Whilst it cannot be claimed for one of the family that he is even of average intelligence, two of the four youngest suffer from rickets, whilst the other two are idiots.

According to the Paris edition of the "New York Herald," New Zealand is taking practical steps to eliminate the epileptic and feeble-minded from its midst, by segregating those persons found to be unfit for marriage in special communities, from which they will be released only after they have previously been rendered incapable of reproduction. This, however, quite rightly, will not be done without the consent of parents or guardians.

With reference to this scheme, it is only fair to point out that New Zealand ranks first as a pioneer in all schemes of Social Welfare.

This is doubtless due to the vast influence wielded by women in the political arena—an influence more considerable and dating from a longer time back than that possessed by women in any other country.

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For, wherever women have a preponderating voice in matters appertaining to wifehood, child-welfare and kindred subjects, their beneficial influence reacts on the community at large.

They, above all, realise that the destiny of a nation reposes in the lap of a healthy and normal motherhood.

XIII

WOMAN'S PREROGATIVE

"Irrationally held truths may be more harmful than reasoned errors."—J. H. HUXLEY.

IF it is a fact that the male of all living species looks to the female to obey her behests in the matter of procreation—acting according to her seasons only—so is it equally true that he is entirely dependent on his mate regarding the sex-determination of his offspring.

As in the realm of sex-causation, where she can choose the sex of her progeny, so in that of Birth Control, it is to woman that belongs the initiative of defining and deciding on such days as she may feel to be propitious either to conception or to immunity from it, according to her desire. And, in the same degree that she will learn how to make full use of her powers, so will she acquire by degrees a complete knowledge of the workings of her ovaries, in order to derive the full benefit of the close times Nature has granted her.

It is in the ovarian activities that resides the crux of my whole thesis of Sex-Determination; and, so closely are they interlaced with the blank week and

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the fruitless month, that, together with the other cardinal points supporting my theories, they must be linked and held together, or fall utterly to the ground.

It is with implicit confidence that I have placed my life's work in the hands of women, because I realise that even as they have to carry the whole burden of child-bearing, so in them also lies the possession of complete " blank " times and fruitful seasons, together with the potentiality for maleness or femaleness in the conception of their offspring.

This hope is the better founded since my thesis, that woman is the sole factor in sex-causation, has never been contradicted by any single instance in the course of examining and verifying the mass of practical evidence, drawn from the thousands of cases which have been the subject of my direct observation.

But in the past year, since my views have been made public, a number of scientists and medical authorities have written to me asserting their belief in the dependence of sex-determination on the female parent. Some have no objection to their names being mentioned. In other cases they are, for professional or other reasons, withheld at their request.

1. For instance, a South African practitioner, of great repute and wide experience, writes: " After years of research I am quite positive that it certainly does not lie with the male to determine the sex of

the progeny. I am equally convinced that the right ovary is male, and the left female. Also, you must have discovered at an early date, as I myself did, that a normal woman menstruates alternately right and left."

He is entirely satisfied as to the correctness of my theory of sex-determination.

2. A lady biologist writes from India: "I have worked on sex-determination since 1914, and I am convinced that the sex of a child does not depend at all on its male parent. This, she adds, "is my most important point."

3. Dr. Reeder, of La Porte, Indiana, writes that his conclusions, based on twenty-five years of experience in 2,000 cases of child-birth, wherein he was usually able to record the date of conception, prove that the sex of a child depends entirely on the dates in the woman's lunar month.

4. A. Emerson, a Washington biologist, writes: "In woman there are a few days out of every monthly period when time alone will determine sex. On other days the changes in the growth of the egg are such as to make it entirely unreceptive."

5. A lady doctor in Scotland writes: "So far, biologists have stated that voluntary sex-production is not possible, probably because they have focussed their attention almost entirely on the microscopical side of the question. . . . I find that my own experience in practice as a medical woman fully bears out

many of your statements. What you term the 'freak ovary' certainly does account for many failures to determine sex." She adds, "I have perfect faith in your discovery."

6. Dr. P. Wangemann (the founder of a scientific institution of embryology at Milan), who has made many experiments on mares and cows relating to sex-causation, after six years' work on the subject of predetermination, writes agreeing with all the main points of my theory; and I could mention many stock breeders who are all equally convinced of the fact that sex-causation depends entirely on the female. I could cite also a number of British doctors, with large practices, who enthusiastically accept and support, if not every point and particle of my theory, at any rate its main points, and particularly the dependence of sex-causation on the female only.

7. A United States practitioner writes recording his experiences, and says: "All sex-predetermination depends on the days, late or early, before or after the woman's periods."

8. Mrs. D. McConnel, D.Sc., writes from California, that all her research work of a lifetime goes to prove that sex is determined at the moment of fertilisation, and that the result depends upon the condition of the female cell when fertilised. Therefore, that it is for woman to decide whether she will beget sons or daughters.

9. A well-known London practitioner, who has had enormous gynecological experience, and who kindly describes my theory as "a great revelation," strongly supports my thesis of the alternate month.

10. Knight is quoted by Carpenter¹ as recording : " In flocks or herds of domesticated quadrupeds it is no uncommon thing to meet with females whose offspring is almost invariably of the same sex, although it has resulted from intercourse with several different males ; on the other hand, I have never met with males that exhibited any such uniformity in the sex of their offspring with different females. Hence I concluded that the female parent exercises the chief influence in determining the sex."

11. Professor Lenhosek, Professor of Anatomy at the University of Budapest, in 1903, concluded that biological experiments show that it is the mother, not the father, who possesses the power of deciding the sex of the offspring.²

But much as I value this professional and medical support, it is to the vast quantity of corroborative data gleaned from women who have borne long families, and have received from the beginning the signs and symptoms betokening the sex as belonging to the one ovary or the other, that I look to to confirm the conclusion that, from whatever angle or aspect the subject of sex-causation may be viewed, in woman,

¹ *Principles of General and Comparative Physiology*, p. 500.

² *British Medical Journal*, May 9, 1903.

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and woman alone, resides the agency—the power—of sex-causation. And just as the fact of the alternate workings of the ovaries ensures to her the capacity of regulating sex, so also do their resultant *close times* endow woman with the prerogative—and above all, the responsibility—of individual Birth Control.

XIV

THE EXPECTED CHILD

“Children are God’s apostles, day by day
Sent forth to preach of love, and hope, and peace.”
—LOWELL.

IT is a commonplace that the smiling-faced woman, erect of carriage and buoyant of step, in no way overburdened with corpulency, though far advanced in pregnancy, can expect with assurance that her offspring will not be otherwise than happy and healthy.

The bright and cheery matron bears the sweet and contented infant, whilst to the gloomy, foreboding mother is born the peevish, fretful and unsatisfactory child.

The former ideal state of affairs would be infinitely more prevalent were every prospective mother to aim, at the very outset of gestation, at fitting herself for the perfect fulfilment of the natural calls of maternity, both before and after childbirth.

It was Sir Truby King¹ who declared that no stock was dealt with on such haphazard lines as are applied to the rearing of human beings. That all

¹ Director of Child Welfare in New Zealand.

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mothers should endeavour to nurse their babies is of primary importance, but in order to do so a proper maternal nourishment should be inaugurated from the time the infant is first thought of.

Yet how many young wives stop to reflect on the serious question of diet as a preparation to the suckling of their babe ?

It is not that they must eat all kinds of food in great quantities—the old idea of “eating for two” has long since been exploded—indeed during the last few months the diet should be reduced to very modest proportions.

When a cow is about to calve, if milk fever is to be avoided with any degree of certainty, it is essential that she be kept off the fresh grass, and fed only with hay and dry food.

And the same note of warning applies to women. Meat should be taken once a day only and fish and egg dishes substituted wherever possible. Soups and oatmeal porridge should be taboo, but fruits of all kinds, stewed or raw, are invaluable, as are vegetables and salad.

Where milk is relished and taken with satisfactory results, a good bowl of bread and milk provides a capital evening meal when other food is often distasteful. But it should be prepared in the old-fashioned way. The bread must be soaked in boiling water, and when this is squeezed out, boiling milk should be substituted. Then add a little salt, unless sugar is

preferred. Throughout the day a drink of barley-water, flavoured with orange or lemon, and sweetened with brown sugar, is refreshing and helps to create the future milk supply.

The exercise taken should not include any form which might be over-tiring, such as tennis, dancing, hunting, or much motoring, and train journeys should be restricted as much as possible.

As regards massage, it may be of great help, but it should not be resorted to until the fifth month; working in a circular direction, the abdomen should be gently massaged from right to left every night with olive or castor oil. This makes the skin pliant and supple, and prevents the appearance of any ugly white lines.

At about the seventh month it is imperative that medical advice should be sought, in order to make sure that all is quite normal at this juncture. Were doctors more often consulted at this time, or a little later even, many a calamitous confinement, or perhaps a still-born birth, might be obviated.

As the day for the event draws near, a great effort should be made to keep the mind occupied and free from care. During the last wearisome days, fear should be banished with a firm hand, and, provided that all appears to be favourable, especially where it is not a first child, the decision should be taken to refuse chloroform or Twilight Sleep where it is possible to do without.

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Regarding the tearing of the perineum, where the case is normal and the doctor is helped by an efficient nurse, there need be, in nine cases out of ten, no such distressing occurrence. A little support at the right moment, and other simple measures, may effectually save the painful necessity of having to stitch that part—an operation which, coming on the top of an arduous confinement, seems to be pretty well the last straw, though it is now far more common than it should be.

It is a fact that two or three generations ago this tearing of the perineum was scarcely heard of. I can count on my fingers the cases in the last generation where this was known to have occurred, and among my mother's friends she did not know of one where there was any such trouble. Although, in spite of their twelve-inch waists as girls, the babies of these matrons were more often apt than are those of the day to weigh eleven, twelve or even thirteen pounds.

One is tempted to conclude that a possible cause of the change in this respect may be an over-ready use of instruments and the hurrying on of the process of parturition, although it would be unwise to question the necessity of such measures in particular instances.

When baby is born, much will depend on the individual effort of its mother whether she makes a satisfactory and prompt recovery, or the contrary.

If she thinks, for instance, that refusing to feed her infant naturally will help to restore her figure, she is mistaken, for it will do just the reverse.

The presumption is always against a child reared artificially in regard alike to health, stamina and resistance to disease, but it is of the greatest importance to the mother that she should suckle her child for her own as well as the child's sake. By this means, not only will the internal organs regain their original shape very much more quickly, but the muscles will be improved in tone and the lymphatic condition eliminated by a fresh blood supply throughout the system, and this will effect a rapid return of energy and vitality.

As regards the diet of the nursing mother, not only is it unnecessary to partake of stout or beer, but there is a distinct advantage in adhering to milk and cream, and plenty of fruit, if the two are not taken in conjunction.

Plenty of liquid should be imbibed ; barley-water is excellent, or any other non-alcoholic beverage that is fancied, The reason why mothers are so often unable to feed their infants after the first month is that they omit to take sufficient liquid through the day. Aperients are injurious and totally unnecessary when the maternal diet is as it should be, and as for the child, many a one has had its digestive organs irretrievably ruined from being dosed with castor oil and the like from its earliest days.

The habit of rising from bed at the fortnight after confinement, and going off to the seaside at the three weeks—a custom rigidly adhered to by the late Queen Victoria with each one of her infants—is to be commended, and it is regrettable that all mothers cannot afford to emulate such an illustrious example. Possibly, however, I may be deemed antiquated in suggesting that when a third week of bed can be snatched and added to the second arranged for by most wives, it is even better still. Those extra seven days of perfect rest and recuperation are invaluable to the nerves and spine of a convalescing mother.

About fifteen years ago a so-called “novel” idea was promulgated, that three or four days of lying up were ample after the event, and that the way to recuperate rapidly was to move freely and to exercise as early as possible. All my experience goes to show that for our highly civilised women to follow the example of the natives of Africa is disastrous to their subsequent health and well-being; whilst the resultant shape and figure of the subjects of this régime that I have come across are almost reminiscent of the Hottentot tribal mother!

On the other hand, I have little sympathy for those mothers who, in their anxiety to avoid the merest hint of matronliness, go to the opposite extreme and affect the “boyish figure.”

An affronted nature will seek its own vengeance.

For the bent head, the flattened chest and slouched shoulders mean a crooked spine. Where the hips are thrust forward, the whole body is out of balance. This tends to the sagging of the internal organs, due to the lack of tone, the upsetting of the vital centres and the continual dragging on delicate ligaments and membranes. With the slouch there exists far less likelihood of proper ovarian and uterine development, and the possibilities of future male issue are correspondingly jeopardised.

It is said that each succeeding generation has its own special vice, but still, viewing things as a whole, it is impossible to escape the conclusion that motherhood possesses a better chance to-day, and a far rosier future than at any previous period of its history.

Already, thousands are making use of the new-found power of sex-predetermination that has been put into their hands, and is it too much to hope that a new generation of children will be born into the world whose welcome is the more ensured since they will be of the sex desired?

More important still, perhaps, is the message contained in this book. For, so long as the estate of matrimony is degraded and demoralised by the resort to questionable measures of artificial contraception, so long as it is a commonplace to witness the troubled, downcast wife, fearful of what she may bring forth, maternity is still enslaved—enchained. It is when

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the *natural* powers of control over the sex and numbers of offspring are used, and not abused, that the emancipation of motherhood is achieved, an emancipation founded on a complete understanding of the laws of Nature.

APPENDIX

A NOTE ON SEX DETERMINATION

THE only serious criticism advanced against the theory of sex-determination explained in my earlier work, "Sex at Choice," which has been received with wide and general recognition, has emanated from a biologist, wedded to the principles of Mendelism, who has disputed my contention that woman is the sole agent of sex-causation.

Little interested in opportunities of obtaining practical and clinical results appertaining to the subject of Sex-Determination, and severely ostracising all tangible and straightforward evidence concerning the highest plane of living being—namely, Woman—my critics have thought fit to pin their faith and limit their vision to the narrow compass of the microscope.

To such findings I suggest that they have attached a value totally disproportionate to their merits, in that they go so far as to claim absolute sex-begetting powers for the mammiferous male—an hypothesis which is scarcely tenable in view of the simplicity and the limitations of the male generative apparatus.

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It is obvious, when one considers this utter lack of complexity, that the male is not likely to be much more than a fertilising agent. For, although it is endowed with gametes holding complete individual attributes and characteristics, the sperm cell, in its constitution, is devoid of actual and direct sex-begetting virtue, at any rate for all practical purposes ; for, if power there be—which I do not admit—it is rendered nugatory, because it operates only in a secondary capacity to the sex-begetting virtue of the female ovaries.

As is well known, the ova are all formed even before the female's birth, whilst the spermatozoa are not formed till puberty, hence the ovum—a single living cell, capable of further growth and great development if fertilised, is a far more slowly matured and specialised cell than the spermatozoon.

But where, it may be asked, resides the actual sex-determining factor in the ovum ? The egg of certain sea-urchins contains a red pigment directly transferred to the embryo. In plants, also, there are certain bodies, the plastids, which are resident in the cytoplasm, i.e. the protoplasm in which the nucleus lies, and are carriers of inherited qualities. These are transmitted by the cytoplasm.

Is it not, then, a more convincing explanation to suggest that the sex-potentiality or sex-begetting factor resident in the female ovary is that of cytoplasmic influence ?

A celebrated leader of Mendelian thought writes to me as follows: "I agree that you have a logical possibility left open that the female ovum may somehow let in one or the other kind of sperm at will, or rather according to physiological state, etc." He goes on, however, to submit that this might not very well be the case in mammals which produce many young at a birth.

We know that the ovaries of all polytocous animals such as sheep, dogs, rabbits, etc., act simultaneously and not in alternation as do those of the ape, the cow, the horse and other higher animals; but even so, there is no reason why, no matter what number of egg-cells await fertilisation, the same condition should not obtain, viz. that the female lets in one or the other kind of sperm at will.

I may quote a passage from a letter written to me by Dr. Borchers¹: "The female is the sole factor in the determination of sex in mammalia. The weak points in the Mendelian theory are: they argue from analogy and on the assumption that, firstly, male and female are heterozygous in sex, and that, secondly, dominance is a matter of chance; whereas experimental breeding points to females being heterozygous in sex (the female being dominant), and the male homozygous. Cytological evidence appears to give the opposite conclusion."

Of his master, the well-known biologist, Professor

¹ W. M. Borchers, M.R.C.S., L.R.C.P., M.O.H., B.A., Cantab.

Bateson, Dr. Borchers adds: "Professor Bateson attempts to bring sex within the realms of the Mendelian theory, but he is not convincing. The semen in the male is mixed in the prostate gland, and, unless it can be proved that the testes secrete alternately, there is no ground for any theory that man has more to do with sex-control than mere fertilisation."

Does not the fact that Dewitz and other biologists have maintained that they were able to fertilise, by means of chemical solutions, the ova of frogs and insects, go far to show that Sex-Determination is independent of male agency?

Then again, what of the power of parthenogenesis? Von Siebold defines it as "the power possessed by certain female animals of producing offspring without sexual union with the male." According to Weismann, "a whole series of insects reproduces exceptionally by parthenogenesis: for instance, many butterflies." Examples of successful occasional parthenogenesis—to the extent, at least, of producing males as well as females—are furnished by the worker bees, wasps, ants, and one kind of beetle.

In the case of *rotifers* or wheel animalculæ, which abound both in fresh and salt water, some of the females have but one ovary, and yet small males occur. These are quite superfluous as mates, however, for parthenogenesis prevails. Yet the number keeps up, notwithstanding!

Quite lately certain experiments carried out by biologists would seem to allow that the proportion of either sex may be altered to some extent by external influences. For instance, Leiter¹ found, in experimenting with the eggs of some moths, that by exposing them to a temperature of about 90° F., the proportion of male individuals was markedly increased, while conversely a similar exposure to a low temperature decreased this proportion.

What probably occurs is that the development of the male ova is accelerated to the detriment of the female ova, whilst conversely, when submitted to a low temperature, the female egg-cells thrive where the male ova languish or are obliterated to utter extinction.

The Mendelians themselves are somewhat inconsistent in the elaboration of their views. They assert, and with truth, that the male mammifer is supplied with duplex gametes, or two classes of sperm, the X-O, and X-Y, whilst the female is possessed of one single kind only, or two X-chromosomes.

This leads them to the erroneous conclusion that the Y-chromosome in the male parent is responsible for the maleness of his offspring, whilst his X-bearing sperm, allied to the X-chromosome of the female, determines female issue.

One feels, however, that some doubt is lurking when

¹ Quoted by Dr. Eden: address at Manchester (St. Mary's Hospital), 5th December, 1925.

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the chromosomes are described as "the microscopic 'organs' within the cell, which are the chief bearers of *heredity*."

Heredity of what? of attributes—yes, but not of direct sex-determination; for this in itself is not hereditary, nor has it ever been seriously submitted that it was; and that may explain the reason for the admission of one of their foremost exponents that the "X-chromosome MAY be an associate rather than a determinant of sex."

If it were true that sex-begetting powers resided in the male, we might naturally presume that the same conditions would apply to every species of living creature, but my scientific opponents have to admit that a converse law applies to birds and other species, it being the female bird that is supplied with the duplex gametes, and *not* the male!

Thus it would appear that this Mendelian law of sex-causation that governs one kind of creature is to be applied to another kind in a directly converse manner, so that one arrives at some highly-conflicting, and indeed amusing propositions, e.g.:

A male lion is sex-determining; a male ostrich is not.

A female pigeon is sex-determining; a female mouse is not.

A male fly is sex-determining; a male moth is not.

But it has been submitted by Mendelians that the same law of sex control applies to all the males of

the "higher animals." This hardly tallies with their claim that, whilst the male moth has no sex-begetting powers the male *fly* is to enjoy the honour of sharing this prerogative with man !

At any rate, surely it might be expected that the mechanism by which sex is determined should follow a universal rule. Why, then, these bewildering distinctions ?

I would maintain that to accredit the Y-chromosome of the mammal with the quality of determining maleness, and the X-chromosome of the bird or insect with similar powers, and vice versa, is to put the cart before the horse. The presence in the zygote, or fertilised egg, of XX or XY in no way proves that it is they that have determined its sex.

They have merely been selected, or attracted, by the male or female egg-cell, according to its needs, to supply the powers of *hereditary reproductivity* suitable to the individual, already "sex-determined," in the female parent's ovary.

For instance, if the mule's incapacity to reproduce lies in the "chromosome inequalities" of the horse mated to the ass, it is not difficult to deduce that precisely in these sex-chromosomes—dependent as they on the other chromosomes—reside entirely the hereditary powers for propagation of the species. The question of maleness or femaleness resident in these gametes does not arise.

I suggest that the sex-chromosome, known in the

one sex as XO or XY, and in the other as XX, are the bearers of the hereditary ability of reproduction in maleness and femaleness—or the means of endowment of the powers of propagation from the male mammal to his offspring and from the female bird, or insect, to hers. In addition they carry also inherited characteristics or attributes such as colour-blindness or the various pigments in the skin or, again, the fur or the plumage of different creatures, attributes which are not actually “sexual” though linked with sex.

The di-gametic quality possessed by the female bird or insect might be accounted for by :

1. The inferior, or lesser, development of the ovaries, consequent to the absence of any mammary apparatus (with which they are so closely inter-allied).
2. The reproduction of the species by means of incubation, as opposed to a lengthy gestation, necessitating lesser sexual distinctions than in the mammal. Similarly the homogametic character of the male bird or insect might be explained by a lesser distinct sexual development; especially is this the case in certain insects where the tendency to parthenogenesis is very marked.

In mammals the X-chromosome would appear to spell femaleness; therefore the female mammal selects from the male at fertilisation, his X-chromosome representing femaleness. With this she completes, together with her own X-chromosome of femaleness, the reproductive powers of her female offspring.

On the other hand the Y-chromosome betokening maleness in reproductive powers, is attracted to the female parent's X-chromosome (of femaleness) as being appropriate for the reproductivity of her male offspring.

To sum up, the power of propagating, together with the sex-attributes and characteristics attendant on it, is hereditary from both parents to their offspring.

On the other hand the power of *direct sex-determination* is not hereditary, nor in any way contained in the so-called "sex-chromosomes."

But were their observations correct, surely these scientists, advancing from truth to truth, would by now have progressed to a point where the true pre-determination of sex through the male agency might, at any rate, become a possibility, whereas, on the contrary, they have to admit that they are still, as Spiess puts it, "groping their way, *à tâtons*, in the dark," completely lost in the fog of this one erroneous deduction, viz.: that man is the factor of sex-causation.

This error is the more gratuitous when one considers how ideally fitted with sex-endowing qualities are women and all female creatures. Witness the elasticity, resourcefulness and adaptability of her spacious, complete and complex generative organs, observe the distinct characteristics of her ovarian constitution, and there becomes increasingly clear the intention of Nature that the female should create within her, from the egg cell, as fertilised by the male sperm, the

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entire maleness or femaleness of the progeny that evolves from the seeming nothingness to the perfection of the full-time offspring.

The cases that I have collected would appear to leave no room for these Mendelian assertions in any shape or form.

I will only quote two. One is of a very fascinating woman of my acquaintance who married three times. To each husband she bore a son. When divorced by the third husband, she had a fourth son by an admirer who died before he was in a position to marry her.

In her case she had suffered all her life from a slight but chronic pain in her left ovary.

The other is from a different stratum of society. A working woman I was acquainted with for over thirty years had nine children, of whom no less than four were illegitimate and resulted in each case from a different paternity. Her first two girls were the outcome of two early "affairs"; then with her marriage came a sequence of five more girls. Soon after, her husband became an invalid, and two more girl babies were born to her by different men who happened to be lodging with the couple at the time. Thus, to *five* different men this woman bore female issue only. It is quite recently that this poor woman, who, in spite of her vagaries, was honest and hard-working, died from the effects of a long-standing trouble in the right groin, the result of an injury sustained in childhood.

Dr. Rumley Dawson¹ gives a mass of such statistics from his varied experience to prove the truth of the thesis of the sex-determining power of woman. He gives also numerous instances of animals. Among them I might quote the case of a cow mated with 15 different bulls. She had 17 calves all female, i.e. 15 different fathers could not breed a male between them.

A mare was mated with more than 6 different stallions, some being used more than once. She had different foals, but all were males. In both cases the mother was evidently unilaterally sterile, only the one ovary being active, so that the multiple fathers could only produce one sex.

Although, therefore, I cannot agree with them on this point, yet there is much in the findings of Mendelists which entirely corroborates parts of my theory; and in "Sex Linkage" one may trace the analogy of my views regarding the influence of the male parent on the female issue, and that of the female on her male progeny. To quote Dr. F. A. Crew, "the sex chromosome constitution does not necessarily correspond with the sexual characterisation; and *sex-determination is not merely an affair of the sex-chromosome*, but is decided by the balance between X-chromosomes and the rest!" The rest being, as I have endeavoured to show, none other than the sex-character of the ovaries.

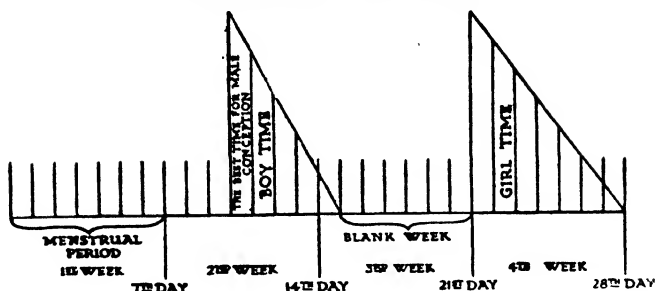
¹ *Causation of Sex*, page 60.

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Such statements as these denote the elastic condition and vague results of Mendelian research in this sphere. It is because their conclusions are thus admittedly lacking in definiteness and their theories are still in such a state of flux that I cherish the hope that in this matter of sex begetting prerogative biologists will retrace their steps, abandon a road that can only lead to a cul-de-sac, and thus bridge the gulf which separates them from the truth.

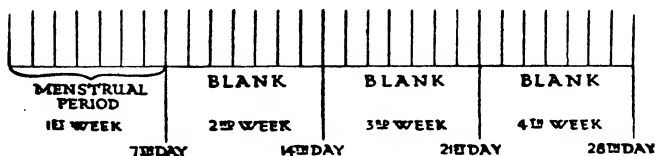
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